

"DON'T STOP THE CLINIC!"

One of our good Kansas friends, to a personal letter given to other matters, adds the following postscript:

"Dr. Abbott, don't stop the CLINIC. Let it come and I will remit before long. I should be lost without it."

And that's why I decided some years ago to continue to send the CLINIC to our regular subscribers, even after expiration of their paid-in-advance subscriptions, since which time I have carried the following paragraph on second page of cover:

"Each subscriber is formally notified of the expiration of his subscription. A renewal remittance should be made promptly. In the absence of renewal, however (and if we don't receive definite instructions to discontinue), we assume that it is the subscriber's desire to have the CLINIC continued, and our record will be arranged accordingly."

I do not do this to be unduly lenient with our patrons or in any sense to give

the impression that the CLINIC is a "free" journal, or that its business is conducted at loose ends; but simply that I may do by others as I would be done by.

Having tried both ways I find that this is the best, and I earnestly urge those who recognize and appreciate our courtesy in this matter to do their part with commendable promptness; while those who do not desire the CLINIC continued are as earnestly urged to say so at the proper time.

Looking over our subscription records we find that most of our friends are expressing their appreciation by satisfactory attention to financial matters; but some are neglectful, and to these we give the kindly suggestion that it takes money to run the CLINIC, and as you are profiting by our effort we are entitled to what belongs to us.

May we not have everything cleaned up before the holidays? And if you choose to add your subscription to THE

The Alkaloidal Clinic

SURGICAL CLINIC (see order-blanks this issue) we shall appreciate it. We are not asking you to pay for **THE SURGICAL CLINIC** in advance, for it is as yet an untried quantity, but we are asking you to give your co-operation and support with the assurance that if it is satisfactory you will become a regular subscriber. See special conditions in the subscription blank referred to.

To understand the world one must often stand apart from the throng, and contemplate the turmoil of strife and passion from some sheltered spot. Thus, when we sit and look up to the patient stars the madness of all the hurry and worry comes home to us; when we consider how little any man or any number of men can shape the course of things, the hot and angry disputes which rage all about us lose the power to disturb.

THE TOOLS OF OUR TRADE.

While the **CLINIC** advocates the use of the alkaloids, it is very far from advocating the exclusive use of these potent agents, or the neglect of other remedies. Our broad platform is the use of any and every agency that will contribute to the cure of the sick, be it what it may; and in every instance the use of that which we believe to be the best suited to the case, regardless of school, creed, ism or pathy.

We give full recognition to the fact that we are by no means the only men who have a message to the profession. We are only earnest, humble workers in a little corner of the wide field. Other men have matter of value to impart, and we trust you will hear them. Among these are our advertisers. Let

it not be thought beneath the dignity of any man to listen to their words. Do not raise the cry of commercialism until you have given consideration to the leading facts in the case.

Our advertisers have certain goods to which they desire to attract your attention.

Who are the best judges of their value? You.

What would be the result, were the goods worthless, of your following their advice to try them? Instant detection, and loss of confidence in the parties who made the recommendation.

Now, when we reflect that these men have invested millions collectively in their business, that their most highly valued asset is the confidence of the medical profession, would they not be preternaturally silly were they to throw away good money advertising goods that were sure to disappoint the user?

We may take it for granted that the advertisers are pretty sure of their ground before they present their wares to the **CLINIC** family.

The case stands thus: Here are men who are investing immense sums in the manufacture of, and much money in bringing to your attention, certain articles they believe to be of value to you in your work.

Can you afford to neglect them? While you are doing so, your competitors are studying the advertising pages to see if they can obtain a hint that will enable them to do better work than you; to succeed where you fail. Can you afford it?

We recognize the fact that you are busy, that your manifold duties and cares press on you, and that all you can do is to snatch a hurried glance at

When you are striving to do that which is right, be courteous and nice in every way, but don't get "turned down."

The trouble with a great many men is, they don't appreciate their predicament until they get into the quicksand.

our reading pages in the hope of glean-
ing a hint or two, while your wife is
driving. So we are trying to put things
in easy shape for you. We have tabu-
lated all our ads under the heads of dis-
eases, needs, etc., so that you can see
at a glance whether we have anything
there you need. All you have to do is
to turn to the "Ad Index," glance along
the headings, and see if there is any
subject on which you need aid; then turn
to the ad and see what they have to say.
It may be a case of sycosis; a school for
self or hospital for patient; a list of
supply-houses; you will find it there.

Suppose you don't; and that there is
something you need in your business
that is not advertised in the CLINIC.
Sit right down and write to us of it,
and we will at once set our "ad man"
to hunt it up, find out who makes the
very best and cheapest, is the most trusty
and prompt in dealings, and we will
have his ad in our next issue. If there
is a malady for which we have no rem-
edy we will send to the great firms and
ask them what they have to offer "for
the benefit of the order." And so we
will keep the ad department in close re-
lation to the actual needs of our readers,
as it should be, and will, if you do your
share.

DR. N. S. DAVIS.

A handsome portrait of the venerable
Dr. N. S. Davis was presented to the
Northwestern University Medical School,
at the opening of the fall term. October
5th, a testimonial banquet was tendered
Dr. Davis at the Auditorium. This
marked the completion of his 65th year
of medical practice.

Very few physicians have so fully

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A man should always be close to the situa-
tion, know what he is doing and not take
anything for granted.

earned the confidence and esteem of their
professional brethren as Dr. Davis. As
the head of a medical college, he aided
in establishing the highest standard of
medical education in the West, resolutely
holding up the requirements although
the size of the class was curtailed to a
degree that rendered teaching strictly a
labor of love. More than any one other
man he fostered the American Medical
Association, of which he has long been
affectionately termed the father. To
him is largely due the success of the
International Medical Congress at Wash-
ington, after the secession of the East-
ern magnates. As a teacher, thousands
of practitioners follow the instructions re-
ceived from N. S. Davis.

But of all his work in this long, busy
career, perhaps in nothing has he earned
his high repute so well as in his con-
sistent, life-long opposition to alcohol as
a medicine. Beginning at the time when
men laughed at the idea that any West-
ern doctor who opposed alcohol could
earn a living, when such opposition was
deemed fanatical, he sturdily maintained
that alcohol had no place in medical
practice that was not better filled by
something else; that its reputed
stimulating and sustaining power
was a delusion and a snare;
and that from first to last, in any dose,
it was a depressant; and that instead of
tiding a patient over a dangerous period
of low vitality, it only added one danger
more.

And to those of us whose view covers
a large portion of Dr. Davis' career, it
is significant to note how each lustrum
sees the professional opinion coming
nearer to this view. The field of alcohol
has been gradually restricted, until from
looking upon it as a matter of course

There is one element that is worth its
weight in gold and that is loyalty. It will
cover a multitude of weaknesses.

The Alkaloidal Clinic

in any and all maladies, its adherents are now hard pressed to find an excuse for its use in a few scattered instances.

These are but a few of the reasons why honors should be showered upon the head of N. S. Davis. As a citizen, an author, a man of austere morality, he has made a record to be imitated.

One can be understood but by a few. If to these he bring light, courage, and strength, he is blessed in himself and in his work. Life for him is fair and sweet. He need not seek a wider field or a more splendid name. He can be but in one place, he can do but a little good; and the sphere is pleasant enough, since he does the little good he can do.

THE PRESIDENT'S CASE.

Though Paul plant and Apollos water, God alone gives the increase. The medical attendants of the late President did their duty, treating the case in the light of the most approved modern surgical principles; but spite of all, their illustrious patient died.

Whence the gangrene? Were the bullets dipped into gangrenous sores? Was it transmitted from the fetid secretions of the mouth, or simply the to-be-expected result of a wound of the stomach? The two latter suppositions appear to be negatived by the presence of gangrene also in the wound on the surface, caused by the first bullet. The only regrettable incident, the only spot that mars the surgeons' record, is the premature crowing over the surpassing excellence of modern surgery.

To all criticisms of the medical attendants there is a homely saying that amply answers: If our foresight equaled our hindsight we'd be right smart men.

Now that he is gone we realize how much McKinley had endeared himself to

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It is an easy matter to handle even congested controversies, where the spirit of the parties is right and honest.

the people, of all classes and sections. The universal grief is simply unparalleled. Perhaps no one instance so well illustrates his greatness, of heart and brain as well, as his proposition to have the graves of the Confederate dead cared for by the Government.

It is a matter for serious thought, that of the seven men elected President by the people of the United States in the last forty years, three have been assassinated. Such things shake the foundations of republicanism.

The accession of Roosevelt also leads one to remark that in this instance a most desirable change has occurred from the usual method of selecting Vice-Presidents. Political exigencies too often have led to the selection of "compromise" men, of secondary caliber; and when the Presidential duties have fallen on these men the result has not been satisfactory. Here we have a man who has become the idol of a great part of the people, a man singularly free from political machine-affiliations, of unimpeachable record, who stood to be swept into the Presidential chair in 1904 by an irresistible flood of popular enthusiasm; a man whose strength, statesmanship and cleanness command the respect of the people, and whose political views so closely approximate those of the dead President that Roosevelt could without a shadow of subordination or weakness retain McKinley's cabinet and continue his policy. Well for the country that such conditions exist.

THE SURGICAL CLINIC.

Some months ago we announced the contemplated issue of a new journal. Then we waited, to see if it were really wanted, if enough of our friends would signify

An indiscreet man usually lives to see the folly of his ways; and, if he doesn't, his children do.

their desire for it to warrant us in incurring the great expense of money and energy necessary to launch it. The responses have been satisfactory, and we expect on January 15, 1902, to present to you the opening number.

Well, why do we add one to the great number of journals now existing? For two reasons: One is that this CLINIC is growing too large. Many readers desire to have their say. All are entitled to space who have a thought, a fact or an experience, even a question, that may be of value or prove helpful to some other brother. But the limits of possible expansion of a dollar journal have been reached, and the publishers cannot go further in enlarging the magazine. It is not good to disturb the settled foundations of successful enterprises, so that an increase in price or in frequency of issue is unwise. A successful monthly would not necessarily be a successful weekly. And even as it is, many of our readers wish us to keep the CLINIC more closely to the alkaloidal lines. They say justly, that is what the journal was designed to teach and that is what they take it to get; not for the miscellaneous matter which the ordinary medical journal supplies.

The second reason is that in the whole field of medical journalism we fail to find one periodical that fills exactly the field we intend the new one to occupy; that is, a journal devoted to the surgery the general practitioner must do himself. The surgical journals are apt to become records of operations by great surgeons, the only lesson derivable therefrom being the knowledge where the reader can send similar patients for operation. Or, they contain records of singular and remarkable cases, that the ordinary phy-

sician is not likely to meet once in twenty lifetimes.

We expect to give by preference the surgery one must do in person; and so we inquire as to the best methods of treating burns, fractures and dislocations, old ulcers, recent wounds, lacerated, contused, etc. We also want the procedures in modern gynecology, minor and major, and the numerous emergencies occurring in obstetric practice, to be exemplified.

Why should not the doctor do a very fair share of specialty work, in the eye, ear, nose and throat? Why should he lose the income from operations on the rectum and urethra, from varicocele and hydrocele? Why put your best patients to the unnecessary expense of a sojourn in the city, if they need electricity, massage, hypnotism, rest-cure, or any other of the non-medicinal treatments now so popular? Outside of the special journals and the drug-treatment there is a vast and important field, and this is where we enter.

We want all the help you can give us. We want your dollar. We want your knowledge, in exchange for that of others. We want you to follow Cuzner's lead and tell us all the little inexpensive devices by which you manage to help your patients without ruining them. We want to know what methods you have found best, and the objections to others. We want you to ask us anything you want to know, and we particularly want you to answer other doctors who ask questions you can answer.

We are asking a good deal, doctor, and we know it. But we also know our men; and that in the great CLINIC family there has developed the true fraternal feeling, the professional communism that

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ennobles our guild, and we are glad to serve as the necessary medium of interchange for such men.

Scattered over this broad land, with pickets established far beyond its limits, are our 30,000 readers. Every one of these possesses knowledge that would aid distant brethren in their life-work; and the more freely each contributes to the common store, the more willingly will others do the same. Let the response be general, prompt and hearty. Let each do his part in making THE SURGICAL CLINIC what he or she looks upon as the ideal of its kind. Don't waste energy in fine writing. Give us facts, FACTS, FACTS.

If we but knew how to admire and take delight rightly, how rich should we not be! Ours might be all that we have seen, cherished, and striven for; ours the stars and the oceans, the earth and its fulness; ours the thoughts of sages, the courage of heroes, the hearts of virgins, the mildness of saints, the visions of poets. We are slow to understand that there is given us here and now more than mortals can deserve.

MALARIA.

The Italians have opened a campaign against malaria on new lines. Starting with the proposition that each new case of this disease is a focus for its spread, they have sought to cure promptly and thus prevent further infection, whether of men, mud or mosquitoes. The trial was made by Gosio in the Maremma marshes. Centers were established at convenient places, the people were educated by circulars, etc., blood examinations made in every instance, and preventive treatment instituted wherever possible. Every malarial case was promptly and effect-

ively treated. The success has been sufficient to warrant continued action along this line.

Malaria has developed in localities in Massachusetts long free from this malady. It is attributed to the Italian laborers who dug up the streets for sewers; but this is well-known to be followed by malaria even where healthy Irish laborers do the digging.

Meanwhile the New York Board of Health has added malaria to the official list of contagious diseases.

Theobald Smith says the malarial parasite lives in the red corpuscles of frogs, turtles, lizards, snakes, crows, pigeons, finches, sparrows, cattle, sheep and dogs. But the mosquito alone, and only the Anopheles, carries the malarial parasite that affects man. The remedies are simple: Kerosene to the pools is a palliative; draining the pools in which mosquitoes breed, screening sleeping apartments, isolating and properly treating malarial cases, are the remedies. There is no such thing as a white American acquiring immunity.

The writer whose eye is on possible readers is no better than a player, but he who looks into his mind and heart to utter what is deepest there, may discover new worlds and become a pioneer therein; may be as one who brings forth from the mine, precious stones upon which the light of heaven has never fallen, but which henceforth shall gladden many.

BRAIN REST.

The prevalent idea to-day of what true education is, seems fundamentally wrong. It is not regarded as a *leading out* of the mind into the inviting fields of knowledge, so that the young student finds himself charmed and enriched by what

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There is nothing else on earth so annoying as procrastination in decisions.

A man does not necessarily have to be a lawyer to have good, hard sense.

he finds there, but only as *hard work* for the brain. The "teacher" is not so much if at all regarded as one who communicates knowledge, as one who forces the "taught" to exert themselves in brain work of the most wearing kind and degree.

We are familiar with the sight of a young person with an extremely sensitive brain coming home from school and sitting down, say at five o'clock in the evening to work on until ten, eleven or twelve o'clock, the brain at its utmost tension to which it is possible to work it. Health is out of the question when such folly is at its height, as it is with us now. Hence there is a constantly increasing number of sufferers from head trouble. In this condition of things, it becomes more and more important to study the subject of rest for the brain. It is not a difficult subject to the parent who is only moderately intelligent and willing to do the best possible for his child. In the early stages of disease from such overstudy as this there is always over-heat in the forehead. By laying a cool hand on the brow you feel at once that it is hotter than it should be. If you could see the brain at this time, so as to watch not only the blood but the nerve-force that is concentrating there under the heated brow, it would not be easy to put away fears of serious consequences should the same state of things continue. Along with this over-heat there is soon a feeling of weight as if the brow were loaded or converted into some unusually heavy substance. This feeling of weight is the result of a weakening of the vessels, and of a congested state of the cerebrum, and when it is allowed to go on increasing gradually issues into that drowsy state that indicates a sadly over-

worked condition of the child's brain. This state of things should never be allowed to come on at all. There should be absolute *rest* from this cause of brain-fag. The child's lessons, and all thoughts of them should be at once set aside. He should be *set free* for the time and not allowed to go to school, or even open a book until the evil threatened is entirely removed. Often the danger does not become apparent until the child *faints*, or falls into an unconscious state, and continues in that state for a shorter or longer period, awakening as out of a sleep. In such a case there is weakness of the heart-action as well as brain exhaustion. Yet the condition is not alarming, since the faint is often only the *natural rest* of the vital system, and specially of the brain. But it surely needs but little common sense on the part of parents, that they may be impressed with the fact of *rest* being for such a sufferer the only relief. It is infinitely better for one to lose six months' schooling in such a time of crisis, than to go on and come at length to complete breakdown of health. But the teacher is the one most at fault. Correct methods, shorter lessons, more exercise, purer air, less of the slave-driver habit, would suggest themselves as the natural remedies. The child's health *first*, then the education if it can be had without danger.

THE LAW OF SUGGESTION THERAPY.

Dr. B. L. Hotchkiss, of Chicago, has been sued by a patient for \$20,000 damages, for improper treatment. She claims that he called in the aid of "voodoo doctors, clairvoyants and exponents of



For fidgets, and nervousness verging on insanity, give a granule of cicutine hydrobromate every hour or two until relief.

In sthenic erysipelas give a granule of pilocarpine every five minutes until slight sweating occurs; then less frequently.

East Indian magic and occultism." "Professor Dew," or "Dr. Kelpa," a man of imposing presence and majestic stature, garbed in robes purple and black, carrying a Victorian cross and a chart with a dot in the center, had her gaze at the dot concentratedly; but in spite of the gaze she failed to recover, so she bounced the occultist and prosecuted the doctor.

And here we see the rise of that force by which the wave of transcendental nonsense now sweeping over the land is to be swept back. Absent treatments may be transmitted by "vibrations" over the world, but the smart adepts can not utilize the United States mails to send out bills and receive remittances. Faith curers and other mountebanks may play upon the credulity of their dupes, but they cannot collect ponderable fees for imponderable remedies. Osteopaths may succeed in evading the State Examining Boards on the plea that their system does not include the administration of drugs, but they cannot thereupon collect by legal process for services including drug-administration. And to all the practitioners of Christian Science, Dowieism, Weltmerism, and even the admitted methods of suggestion, there opens up a perilous possibility of damage suits, for neglect to use tangible means of treatment, wasting precious time in methods not defensible in a court of law, and obtaining money on pretenses that may well be pronounced frivolous by a jury endowed with plain every-day horse sense.

If I had property enough to render me a "mark" for the blackmailer, I would not venture on any of these suggestive methods of treatment; and mark my words—the next ten years will see a multitude of damage suits against the professors of imponderable therapy.

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THE A. M. A. AND THE CANTEEN.

There is trouble brewing over the endorsement of the army canteen at the St. Paul meeting. A writer to *The New Voice* characterizes the method by which it was secured as "a species of chicanery such as would do credit to a Tammany snap-shot caucus." The matter came up among the "military surgeons," was brought up in the A. M. A., and promptly tabled by a decisive majority. It was later referred to a committee with the understanding that a report would not be made until next year. Advantage was taken of a sparse attendance at a business meeting, the whisky men were all run in and the resolution snaked through when not over twenty-five people were in the room; the negative vote not even being called.

In another number of *The New Voice*, the venerable Dr. Didama confirms these statements, putting the number of members present at not over fifty.

And thus the great American Association allowed itself to be ranked on the side of the rum-sellers. That is not the way to make the Association respected.

Next to the sunlight of heaven is the cheerful face. Who has not felt its electrifying influence? One glance at such a face lifts us out of the mists and gloom and shadows of life into the realms of the beautiful and bright and true. A host of evil passions may lurk around the door, but they will never enter and abide in such a heart. The cheer and brightness will very soon put them to shame and flight. To cultivate cheerfulness is to increase the capacity for happiness not only for one's self but for all who may by chance step within the circle of our influence. A smile? The rainbow of virtues thrown upon the face by the prismatic spectrum of a good and happy heart:

In paralysis agitans nothing as yet has proved as useful a palliative as hyoscine hydrobromate. Dose, grain 1-100 twice a day.

EPIZOOTY.

During the summer an epizootic malady prevailed among the horses in many localities. The symptoms were fever, cough, swelling in the throat, if neglected resulting in fatal choking or hemorrhage. The fever lasted two to five days, the cough one to two weeks. The malady appeared in New York City, extending along the Hudson to Troy, and west to Buffalo. In September it was reported in British Columbia and Alberta, among the horses, cattle and swine; appearing as a severe and rapid influenza.

In Oil City it affected horses, especially those that were worked constantly.

In Denver it appeared among the dogs, then affected horses, and recently has spread to the human race, especially attacking strangers.

I would suggest that a trial be made of calcium iodized in the opening stages of the malady, the remedy being pushed to full effect. The debility also points to the wisdom of an early and persistent administration of strychnine, with rest, full feeding and local treatment of the throat.

GRUMBLING.

No habit is more easily acquired or productive of more misery, than that of grumbling.

How about the drink habit?

I wonder how many wives, at the great settling and balancing of accounts, will find themselves charged up with their husbands' drunkenness, driven to drink by their ceaseless grumbling.

It is so easy to find fault. Every sublimity occurrence has a side to it that

The man who wants to marry happily should pick out a good mother and marry one of her daughters; any one will do.

can be blamed or ridiculed; and a wit sharpened by exercise, barbed with discontent and tinged with bitterness, will always find something unpleasant to say.

Why say it? The world keeps its own troubles in plenty—why bring them into view? Turn the garment over quickly so as to hide the patch, and let the light shine on the better side. How much the woe is increased by everlasting harping on it. And what a comfort beyond estimation is the sunny-faced woman who never sees any thing bad, but always calls attention to the bright, the happy and the good. Somehow, the part of the world she inhabits always seems to be all three.

The most influential of all the virtues are those which are the most in request for daily use. They wear the best and last the longest. Superfine virtues, which are above the standard of common men, may only be sources of danger and temptation. If a man is to stand erect, it must be by his own efforts; for he can not be kept propped up by the help of others. To be truthful, to be continent, to be benevolent, may be common virtues, but their lustre is as the brightness of pure gold.

TEMPERANCE IN EUROPE.

All Europe seems to be waking up on the subject of temperance. The governments themselves are alarmed at the stupendous evils resulting from the use of alcohol. A series of international anti-alcohol congresses has been held. The last was recently held in Vienna, and was a congress remarkable for the presence of many notable representatives of the Austrian and other governments of Europe. It was assured in advance of widespread sympathy in Austria, when it received direct material support from the government. The prime

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minister Dr. von Korber, attended its opening sitting, and cordially welcomed the members of the congress as bearers of a mission of the highest importance for humanity and civilization. The Hungarian government was represented by delegates from the different ministries, and Belgium, Denmark, France, Holland, Norway, Russia, Sweden and Switzerland had special official representatives. More than 800 members attended the congress banquet, at which not one drop of alcoholic liquors was drunk. It was no doubt the first teetotal banquet ever held in the empire. Let the good work go on.

Life's journey leads us by a way we know not of. It is best not to know. When you come to rugged hills climb them, not failing to admire the ever-widening view of the verdant valleys, lying just below. Enjoy the beautiful landscapes as you pass them, and rest assured that at the end of your journey every good thing that has entered into your aspirations, plans and purposes, will greet you in that world where hope is turned into full fruition. What you put into the fabric of your life here, will be interwoven in the warp and woof of your destiny there. Make the most of present opportunities, for we shall not pass this way again.

COLLEGE SPORTS.

The average, live college student of to-day is possessed with the keenest and all-absorbing interest in athletics.

The "trainer" has become a most important factor in collegiate life.

Never was there a time when the contests between rival teams of different colleges were more fiercely fought. To be "Captain" of a football nine, is esteemed by the student an honor far greater in

the student world, than to stand as senior wrangler of his class.

The man of broad shoulders, expansive chest and massive neck, is no longer the exception but the rule, in the rank and file of our college rosters to-day. A student who enters college with any physical defect, is soon a "marked" man, and under a vigorous system of gymnasium training, and proper exercise, the defect, constitutional or otherwise, is soon corrected in nine cases out of ten.

It has become an all-important question therefore just how much of athletics, and how little of actual *book-lore* is considered necessary for graduation at our foremost seats of learning.

The American athlete stands foremost to-day, having achieved world-wide prestige in international contests, coming out winners among the "picked" men of all countries.

Is this a thing to be proud of? Emphatically yes!

The magnificent physical specimens of young American manhood to be seen in all colleges to-day, are one of the strongest possible proofs that our educators are awaking to the fact that health, strength and perfection of body, is of even greater importance than the finest scholarly attainments, and this opinion is no longer confined to a few enthusiasts, but is becoming the general and sensible conclusion of all up-to-date teachers.

GREAT TRUTHS ALWAYS AROUSE OPPOSITION.

Why is Alkaloidal-therapy opposed by certain influential elements of the medical profession? Let us look for a reply at medical history.

Every great advance in the science has

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In paralysis agitans nothing as yet has proved as useful a palliative as hyoscine hydrobromate. Dose, grain 1-100 twice a day.

In congestive conditions of the uterus and ovaries, anemonin has proved quite effective. Dose, one granule every hour until relief.

been bitterly antagonized; and the greater the advance, the more bitter and even virulent has been the opposition. Did the medical profession receive Harvey's immortal discovery of the circulation with tumultuous plaudits? Well, hardly!

Did they elevate Jenner to a throne of honor? They'd have elevated him with a rope about his neck if they could have caught him.

In earlier days the medical reformer, the man who struck at consecrated error and sought to illumine the official ignorance, stood in imminent peril of the dungeon or the stake. How the vials of wrath were poured out on the Apostles, Augustine, Galen, Roger Bacon, Paracelsus, Abelard, Luther, Montaigne, Lecky, Spencer, Darwin and Huxley. If we had any doubt of the truth and exceeding importance of the work we are doing, the nature and weight of the opposition evoked would convince us we were on the right path. We take our stand fearlessly with the long line of maligned innovators, who since their death have been ranked as the brightest lights of the human race.

Why is it that physicians will not recognize such merit during life, in men they are ready to canonize after their death? Let us frankly acknowledge that it is simply the crassest commercialism. They cannot afford to acknowledge merit in a competitor.

But it is a matter of comparative indifference whether the present generation recognizes and acknowledges the truth of our actions. If we know we are right, it is our duty to go ahead and not trim our sails to catch the breezes of popularity. The man who regulates his views and conduct by the opinions of others is a weakling; the strong man does what he feels to be right and waits patiently until the correctness of his position is recognized. And so we go on serenely in our work of seeking to establish therapy on a firm foundation, and rescuing its application from sheer empiricism and from pessimism; secure in the conviction that when future generations come to examine the corner stone of the twentieth century medical practice, they will find W-A too deeply chiselled thereon for time to efface.

A LITTLE OF EVERYTHING, EDITORIALY SUBMITTED.

Butchers never die of consumption. Uricemia protects them.

Five hundred cocaine fiends are reported in Roanoke, Va.

Mackie finds leucocytosis a favorable sign in scarlatina.—*Lancet*.

In phthisis, if the digestion is bad, the only drugs indicated are those that will restore it to a normal condition.—*Hug-gard*.

In Metrorrhagia, give hydrastinine, four granules daily, and during the menstrual week add atropine and rest in bed.

The static current has proved useful in aural vertigo. Apply by an insulated electrode introduced into the ear. It is not effective in organic lesions, but relieves functional cases quickly.

Overlach recommends saloquinine, the ester of quinine as being tasteless, causing no disturbance of hearing or other nervous symptoms, and not irritating the stomach or bowels in any dose.—*Cent. f. Inn. Med.*

THE ALKALOIDAL CLINIC is my favorite medical journal. Dr. A. E. Wanamaker, Hamburg, Ia.

The Alkaloidal Clinic

Baradat finds sodium cacodylate useful in phthisis with anemia, in ganglionic and lymphatic patients, but not so good ulcerous and cavitary cases.

"Those who have finished by making all others think with them, have usually been those who began by daring to think for themselves."—*Cotton*.

It is estimated by liquor men that the abolition of the canteen means a loss to the trade annually of at least \$2,000,000. And yet the canteen was considered a good temperance measure!

In Honduras Egbert has found malaria at an elevation of 4,000 feet, far above the mosquito level, where there is good water, natural drainage and salubrious climate. He blames it on the flea.

Marx finds that the nausea and headache sometimes occurring with spinal anesthesia by cocaine, may be averted by injecting hyoscine hydrobromate gr. 1-200 subcutaneously, at the same moment the cocaine is used.

When a female of the "bleeder" family is pregnant, the development of the malady in her offspring has been prevented by the administration of calcium chloride, 2.0 grams a day during the last three months of pregnancy.

The French government evidently does not believe in the army canteen, for the minister of war last year issued a circular forbidding the sale in the canteens of barracks, quarters, camps, or exercise grounds of any brandy or liquor with an alcoholic base, or of any of the numerous drinks known as appetizers.

For Pruritus of anus or vulva give aluain, seven granules daily. This is suggested by Dr. Phelps. Let others suggest.

Silver-mounted wares are dangerous from the amount of cyanide employed in the plating.

Mayer says that in health the body excretes about 0.3 gram of potash salts and 7 grams soda salts; while in the cancerous and tubercular cachexias this proportion is almost reversed.

Bismuth is by no means perfectly safe. Dreesman quotes numerous cases in which toxic symptoms have followed its internal or external use. Among these are mentioned stomatitis, sore gums, discolored tongue and mucosa, a black line along the teeth, enteritis, nephritis, black sediment in the urine, and dysphagia. These were due to the bismuth, as no impurity could be detected in it.

There seems no good reason why the mosquito should monopolize the carrying of malarial and other germs to man, and we predict that all the blood-sucking insects will be found capable of transmitting any of the infectious maladies. Possibly this century may see methods devised to rid the world of fleas, flies, bedbugs and other insect pests, as well as of mosquitoes.

Dr. Hodgson, an American surgeon, has treated nine cases of yellow fever in Costa Rica, by hypodermic injections of a tincture made from the seeds of the simaba cedron. The seed is applied locally by the natives to relieve the suffering from the stings and bites of snakes and insects. He suggests that an alkaloid from the cedron may be extracted that will cure yellow fever as quinine cures malaria.

For Hay-fever and Asthma, give strychnine arsenate to full effect, if it takes a grain a day, and spray with Euarol.

LEADING ARTICLES

BOLDINE, THE PRINCE OF DIURETICS.

Something New in this Important Field.

By W. C. Abbott, M. D.

FROM *Peumus Boldo* are derived an alkaloid, *boldine*, and a glucoside, *boldo-glucin* ($C_{30}H_{52}O_8$). *Boldine* increases the elimination of urea and the secretion of bile. Taken by the stomach it causes a bitter taste (being evidently partly eliminated by the saliva) and a sense of heat in the stomach. It increases the appetite and the digestion as well, displaying specific action upon the liver. Chronic hepatitis, jaundice, hypertrophy of the liver, hepatic colic and hepatic maladies contracted in the tropics, have been successfully treated by *boldine*. Bilious vomiting, headache and jaundice disappear under its use.

Houdé recommends *boldine* highly as a remedy for gall-stones. Naunyn says that these are formed not only in the gall-bladder but in the biliary ducts. Cholesterin and calcium bilirubinate, the principal chemical components of biliary calculi, come from the mucous lining of the biliary passages. The lithogenic mucous catarrhs may be pro-

voked by microbes (*bacillus coli*, Eberth's bacillus, etc.), and are therefore of infectious origin. Such catarrhs are not acute, but the product of microbes whose virulence is much attenuated. They cause stagnation of the bile in the ducts, though not a total obstruction, the bile being evacuated normally. Normal bile is scarcely sterile, the colon bacillus being sparsely found in this fluid. The cause of concretions is found in the retarded flow.

Some calculi form rapidly, others more slowly. They may remain a long time in the gall-bladder without giving rise to any symptoms whatever. They do harm by exciting catarrh, cholecystitis and cholangitis. If of infectious origin the bacilli multiply rapidly. The calculi interfere with complete evacuation of the bile, with results similar to those due to the retention of residual urine in the urinary bladder; as the residual bile forms an excellent medium for the cultivation of infectious bacteria. Thus, a nidus may be formed for grave auto-

intoxications, or infections of the bowels, the colon bacillus becoming very virulent in residual bile.

The resultant cholecystitis may provoke the expulsion of the calculi, producing the agonies of hepatic colic with subsequent jaundice or the attack of colic may itself cause the cystic inflammation.

Recovery may ensue in every stage of cholelithiasis if all the concretions are evacuated, by the gall-passages or through fistulous tracks. By a "cure" is meant the cure of the infectious element, when the malady becomes latent, the ducts being pervious. This may be permanent or only temporary. The most approved method of cure is the production of an abundance of bile. It does not follow that an agent that will produce this in health will do so when the biliary passages are obstructed. Chologogues lose their efficacy in the presence of infectious cholangitis.

So much for Naunyn, whose skepticism as to efficacious treatment is simply the expression of modern European therapeutic nihilism.

Houdé places boldine in the front rank of remedies for cholelithiasis, for its chologogue action is rarely wanting.

Dujardin Beaumetz and Bourgoin found it notably increased urea elimination, and especially the bile excretion, without affecting the circulation, the temperature or the quantity of the urine. This gives to boldine the character of a true hepatic stimulant. The first notable effect is an increase of the bile, then follows a diminution of the hepatic congestion. When appendicitis depends on defective bile-supply it is favorably influenced by boldine, which sweeps out all organic residues whose stagnation sets

up this affection. Boldine should also prove effective in the hepatic maladies consequent on prolonged residence in tropical countries. In malarial hepatitis boldine has not proved efficient, unless quinine is administered at the same time. Sodium arsenate renders the combination still more effective.

It may be that in boldine we shall find the remedy for defective renal elimination.

Merck's Archives for 1896 gives the dose of boldine as gr. 1-10 to 1-30, and the price as \$3.00 for fifteen grains.

In Parke, Davis & Co.'s Pharmacology of the Newer Materia Medica, boldo is pronounced by Zaremba most useful in gonorrhea, in atonic dyspepsia with or without biliousness, in chronic cystitis, in chronic hepatic abscess, and as a powerful anthelmintic. Eliminated through the urine, boldine increases the excretion of urea but not of water. The glucoside, boldo-glucin, has marked hypnotic properties, and is also said to compare favorably with cocaine as a local anesthetic.

Houdé advises boldine in granules of 0.001 each, of which six to twelve should be given daily. I have prescribed five to ten of these granules together at bedtime, with very good results. In one case where the renal elimination had fallen to 20 oz. daily, containing 350 grains of solid matter, five granules at bedtime raised the elimination to about 600 grains and the quantity to 64 oz. In another case, the elimination of solids rose from 300 grains to 600 and 800, with corresponding improvement in the symptoms and feelings. These two cases are all at this writing in which I have been able to use boldine, the supply of which is as yet very limited. Steps



In Gastro-intestinal Catarrhs give juglandin, a granule every two hours, to stimulate healthy secretions and replace the morbid products.

In Dilated Capillaries, try hamamelin a granule every hour, limit food and drink, order exercise and free cold bathing with elastic pressure where possible.

have been taken to import it in quantity, and by the time this is in print the alkaloid will be accessible. Two cases are of course too few for positive conclusions, but the results in these warrant me in advising a trial of boldine in these cases of defective elimination which have proved so intractable to treatment.

It only remains to acknowledge my indebtedness to Dr. Epstein for his researches through the literature of "Boldo," the results of which are here presented.

Bibliography: Pharmacology of the Newer Materia Medica, Geo. S. Davis, 1889. Reference Handbook of the Medical Sciences, Wood & Co., 1901. Bent-

ley and Trimen: Medicinal Plants, 1880. H. T. Webster: Dynamical Therapeutics, 1898. Nothnagel and Rossbach, 1894. Spiegel, in Liebreich's Encyklopædie der Therapie, 1896. Merck's Index, 1896. Houdé: Revue Therapeutique des Alcaloides, 1901. Naunyn: Report of Internat. Med. Congress in Paris, 1900.

Chicago, Ill.

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Since the preparation of the above we have secured a limited supply of boldine by importation and offer granules gr. 1-67 (.001), until the present supply is exhausted, as follows: 100, 60c; 500, \$2.75; 1000, \$5.25. Address the A. A. Co.—Ed.

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LOVE AND SEXUALITY FROM THE WOMAN'S STANDPOINT.

"Ut Prosim."



WITH all due respect to established customs, and with perfect cognizance of the disapproval of Mrs. Grundy, I boldly assert that no marriage ceremony, no bands forged by law of man be he Priest or Pope, can make wrong right, or give the woman the fulfillment of the divine promise: "To have and to hold, until death us do part." The law or his honor may keep the man to his bad bargain, but "to hold," as many a woman well knows, is not "to have," and God's law which is the law of laws—the sexual attraction of the male and female—is not mocked by any counterfeit warranted pure by law. Let the divorce courts and the innumerable scandals of the daily press be proof.

It is the usual custom for women to go into tearful diatribes about "the wrongs wives suffer," but after some

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In Insomnia due to physical fatigue, give a granule of veratrine dissolved in half a glass of water on retiring. Repeat in one hour if necessary.

years of study, and a long and intimate acquaintance with the marital woes of women, I most truly sympathize with the men. Many husbands it is true are far from what they should be, but very few at least are *as far from being males as most women are from being normal females*. It is just this question of sex, which we need to discuss. The real need in a right wedded life is not for anything but just true, pure nature itself. An ordinary man may fall in love with a goddess, or a queen, or some such creature of the imagination, who is too pure and holy for him to touch, but as soon as he has married this spiritual creature he is sure to make material and physical demands upon her. Nor is he wrong, for he is but one of the human family and is following out the most powerful of all the instincts, the law for the preservation of the species.

The unpleasant fullness in the head after violent and unaccustomed exercise subsides promptly after a granule of Veratrine, repeated if necessary.

If I have made myself plain, I have shown the absolute purity and lawfulness of sexual passion between the sexes; but while in all the whole world nothing is more truly divine than the true love embrace, nothing is more degrading and low, and withal unsatisfying to the real man, than a mere lustful indulgence with an unwilling or unreciprocative partner. Men have yet to learn and demand the obliteration of the immeasurable abyss between the two.

The sexual natures of the pair are unlike. After years of experience I am forced to admit that there is a vast difference between the sexual love of man and the sexual love of woman. A man many times gratifies a physical appetite only, while to a woman (unless she be artificially stimulated by wine, drugs, or a life of debauchery) this is impossible. She gives something more than her body—she gives her soul, her very self, her all!

There are many true women of as strong and as passionate physical natures as men, normal, hale, and hearty females with all the powers of reciprocal sexual enjoyment, but these same women can be and *are* continent, though eagerly sought and strongly tempted by the opposite sex, *unless they love*. In other words, the sexual act for the woman is more closely allied to the affections, and to the mind; and these must be in harmony to give her the perfect orgasm, without which, in marriage as outside it, there is no purity or satisfaction in the act.

Here, then, is the secret of marital misery. It is not so much the lack of function, or even the physical discomfort, of the unreciprocating female which

occasions her chronic state of apathy or disgust, it is her condition of mind. This statement I know to be true, not alone of the sexually dyspeptic but also of the real flesh-and-blood woman who yields herself without desire.

Nature's lubricating fluid gushing forth from the "glands of Bartholine" of the normal woman, with the first faint, thrills of love and desire moistens her sexual organs and prepares the way for the painless entrance of the male, not only making the very act painless but giving exquisite pleasure second only to the orgasm itself. But while this need of nature is always ready, while the lubricating fluid is normally never lacking, it must be called forth by the affectionate nature of the woman being first aroused, by her mind being in tune to the song of love; for there is no other power so great as mind in its effect upon the body.

No man can fully understand the disgust, the pain, the exquisite suffering of the outraged woman. She may "lie like a log and take it," as some men express it, but, oh, if they could know the thoughts of that log! If they could realize the body hurt, the mind hurt and the soul hurt, they would hesitate long before indulging in any such copulation. When the feminine organs are not moistened by the willing mind's call, there is a dry, pulling, tearing sensation at point of entrance, and the very organs seem to be thrust in upon themselves. Every moment the discomfort increases, and with it the patience and temper of the victim. When a devoted wife of more than usual sexual power, who has enjoyed years of sexual pleasure with her husband, confesses freely that she suf-



For the relaxed form of hemorrhoids with rectal prolapse, Waugh's Anticonstipation granules, one every waking hour, prove very effective.

The CLINIC and Alkaloids are gaining in favor with me every day. Long live the editors to continue in the good work.—Dr. J. G. Stucky, Walnut Creek, Ohio.

fers an agony of mental and physical loathing at the one time in the month when the sexual meeting is sometimes indulged in to please her mate, it becomes clear, what the mental and physical condition of the unfortunate woman must be who always has it to endure, and in whose mind the very thought is synonymous with pain and disgust.

The normal woman, if she be a wife, well loved as well as loving, needs no commiseration, for "the law," by the decree of the Omnipotent, has been made to enhance the love of the pair by making them possible partners in a divine ordinance, joint sharers in an exquisite pleasure that is the just and wise reward of that "love which is the fulfilling of 'the law.'" For the two who are mates, whose minds and hearts are one, who are truly "one flesh" in both the spiritual and the physical sense, we need no thought, they require no counsel. It is to that unfortunate class (alas by far the greater portion of the human family) who have awakened from the honeymoon to find themselves caught in a net from which there is no escape except by death or the divorce court to which our sympathies should be given.

By giving no hint of the parties' personality, I shall violate no confidence in illustrating, by the following tale of woe, one of the many cases of marital unhappiness which have come to my attention:

Mrs. D., a lady well along in the thirties, came to me after a few months of marriage and asked for help and enlightenment. She said: "When we were on the wedding tour all was right, and I found great enjoyment in coition for I am 'all right' and perfectly healthy, but now I find myself getting

more and more irritable, and as I am never satisfied any more, I absolutely hate the thing and *almost hate him!*" On inquiry I ascertained that in the honeymoon the husband, in his ardor, was able to "go" twice, giving his partner time to catch up with him on the last orgasm, which act of completeness gratified her desires perfectly and left her satisfied and content. Later on the act lacked the stimulation of novelty, and being too quick for his mate he would thoughtlessly indulge his own appetite and then go (and men through ignorance or selfish thoughtlessness are often at fault in this) to sleep serenely unconscious of the long hours she would lie awake with the sexual hunger he had aroused unappeased.

My purpose is not to go into any dissertation as to how the male may prolong the act, but to show how surely the sexual magnetism once reversed, as surely grows from hating the act to *hating the man*. In this instance I told her just what to tell her husband, to explain to him her "orgasm" and her need of, and made all as plain as I could, how he was to help her quicken the climax; but she looked aghast and exclaimed: "Mercy, I *never could speak to him of such a thing*." The absurdity of telling me, almost a stranger, and yet being too far from sympathy with her own mate to mention this thing, of such vital moment to their own welfare and happiness, to him, did not occur to her.

The woman who is "ashamed" to tell her own husband, is very often the woman who is not ashamed to tell the other woman those things which should be sacred to the two alone. To my mind, it must be a peculiar kind of mod-



In Sthenic Erysipelas give a granule of pilocarpine every five minutes until slight sweating occurs; then less frequently, and note results.

For Fidgets and Nervousness verging on Insanity, give a granule of cicutine hydrobromate every hour or two until relief. Credit this to Shaller.

esty which permits a woman to lie in the arms of a man to whom she is such a stranger that she dare not mention those vital conditions which either make or mar eternally their life's happiness. In the case given, I heard nothing further from the lady for some years, and then heard a rumor to the effect that there had been a scandal in the church, her name being attached to that of the pastor with most unsavory details. I couldn't help but think it would have been better for both herself and her husband had she taken my advice and told him before it became too late.

This cohabitation which shuns speech, which hides beneath darkness the act which each blushes to recall, th's embrace which like some disreputable action of which to be ashamed is indulged in only at night, may be sufficient for some people, *but it is not love*. If woman was made a "a thing of beauty," it surely was to be "a joy forever;" if she has been given the power of reciprocal love, it was to endear her to her mate; and every charm she may possess should be offered up gladly on the altar of love. To those who prostitute the love-act, to those who in their ignorance, see not love but lust, to those who judge all men by themselves, and seek to cover the purity and beauty of the sexual union with the unclean garment of their own foul thoughts we can only say: "Father forgive them, they know not what they do."

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It is said that men are blind when it comes to comprehending women; and perhaps it is not easy for one to place himself on the woman's plane. And yet, the planes intersect, and possibly

by correlating other knowledge we may solve this charming problem. The central facts of femininity are maternity and protection. Deep in woman's being, unrecognized by her mentality but pervading her being, is the instinct that guides every female creature to the acquisition of progeny.

When boys, we drove the cow to pasture. At certain times she turned up missing. The father, versed in cow nature, simply inquired where was the nearest bull, and there we found the cow. Was it sexual intercourse she sought? Nonsense! It was maternity; and becoming impregnated she sought the male no more until the time came for another impregnation. And yet the society of the male was a need to her; for herdsmen on the great plains have found it necessary to keep a due proportion of steers, as cows alone do not thrive—timid, etc.

The same instinct presents itself in women who run after prize-fighters, athletes, and send flowers to the most brutal criminals, even marry them if permitted. Here is an inheritance from the countless ages in which the woman's security and that of her child depended on the brute strength of her mate. It is strong, perhaps brutal, redundant masculinity, that attracts the woman in such cases; and it is crass ignorance that sees no reason for such infatuation.

The woman seeks maternity; and certain instincts—unconscious, remember—lead her to see in a certain man traits that impel her to make him the father of her child. It may be sweetness of disposition, commanding intellect, or perhaps simply broad shoulders and straight legs, or a well-rounded calf.



In England, Murrell has strongly recommended senecin to bring on menstruation. It is said to be effective and harmless. Dose, one granule every hour until the flow appears.

In Duodenal Catarrh with jaundice or biliousness, give copper arsenite gr. 1-1000 every hour or two while awake, and use salines against constipation.

Who can tell? The unusual or unaccustomed may fix the wandering fancy; or some subtle recognition of underlying strength, of abounding masculinity. And the keen relish of women for petting is simply a corollary to this; for, having secured her chosen mate, every evidence of her security in his complete undivided possession adds to her happiness. Yes, even though many women delight in playing with this security, and relish the peril of uncertainty, as they do other perils that make the heart beat fur-

ously. And even in the final consummation of love, in the abandonment of the sexual embrace, what most enhances and spiritualizes the woman's bliss is the consciousness of the delight she is rendering her chosen mate. It is impossible for the normal woman to enjoy alone this act. Even in masturbation she must keep constantly and vividly before her the thought of a male mate, to render such solitary indulgence pleasurable.—
ED.

NOTES ON THE CLIMATE CURE IN TUBERCULOSIS.

By S. A. Milliken, M. D.



ONE OF the last promises I made before leaving the East, was that I would give to the CLINIC for publication the conclusions reached from my studies of the climate of the Southwest in its relation to the treatment of tuberculosis. Nine months have passed with the promise unfulfilled, because the longer and the more carefully I study the subject, the more thoroughly I realize that I have not mastered it—that it will require years of careful, painstaking investigation, to fit one to give a reliable, authoritative opinion on all points involved.

On a few points I have satisfied myself, and these I will briefly notice, in the hope that I may thus aid my professional brethren in securing to their patients the fullest benefits of the climate cure—such benefits as I myself in common with many other consumptives have secured.

While the climate of New Mexico and Arizona without doubt comes the nearest of any in the United States to being

the ideal climate for consumptives, it is equally certain that it falls considerably short of perfection, that there are some disadvantages which must be counteracted as far as possible by the intelligent care of the patient, his physician and his friends, and it is to give so far as I am competent the information necessary to attain this object, that I write this paper.

In the first place, it is not prudent for the patient to come immediately from the extreme North to the extreme South. His chance of being immediately benefited will be greatly enhanced if he will make several stages, stopping for a week or two at the end of each. Pueblo would be a good point for the first stop, and Las Vegas, Santa Fe, or Albuquerque for the second, going thence to whatever point further south may be selected.

If he comes from a coast region he should be very cautious about going at once to the higher altitudes. Especially is this true of the patient who has a weak

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Always keep iodized calcium on hand. When you want it for a case of Membranous Croup, you want it in a hurry. It is good for many other things—all iodine indications.

For Constipation of Infants dissolve a granule of lobelin in 100 drops of water and give 5 drops every hour until bowels move. This comes near being the ideal infantile cathartic.

heart. The zone between 2000 and 5000 feet is usually the best.

The patient should be warned by his physician that the southwest is *not* a land of perpetual sunshine as has been claimed, that it is *not* a land of perfectly equable temperature, that it is *not* a place where one can go and get well without effort, without regarding most carefully the laws of health.

He must be thoroughly impressed with the fact that it is just as necessary to have good, warm clothing, to shun exposure to depressing cold or enervating heat, to guard against sudden changes of temperature, to exercise the utmost care in regard to food and drink, to carefully observe all hygienic and sanitary precautions, as it is in any part of the North.

Proper clothing is of the greatest importance. Indeed so important is it that a consumptive who cannot secure the means to bear his expenses here, and at the same time get good clothing and plenty of it, will do better to get the clothing and stay where he is. The same rule holds good in regard to food.

No one should come here without a good, warm overcoat, and at least nine suits of good underclothes, in three different weights, either wool or silk, no cotton. A good waterproof coat and at least two pairs of heavy soled shoes are also necessities.

There is always a sudden, decided fall of temperature at sunset, and any one compelled to be out at this time or later should be provided with extra clothing sufficient to meet the change, to prevent any chilliness or feeling of discomfort.

During the hot season it is unwise to spend any considerable time in the direct

rays of the sun during the hottest part of the day. Remain outdoors but keep in the shade.

All water used for drinking or cooking purposes should be distilled. In most localities the water contains not only injurious minerals but a large amount of organic matter as well.

Great care should be exercised in making certain that the canned goods used are in good condition, and that the fresh meat does not come from a slaughter-house where they make a practice of killing animals while hot and angry, and bruised from long drives and frequent ropings.

The care of the skin is an important factor in the "Climate Cure." All underclothes, socks and shoes should be changed every day. They may be worn again after a thorough airing and sunning, but a washing is better for the clothing and socks.

A thorough flesh brushing at least once a day is essential for securing best results, and in most cases a hot sponge-bath once a day is beneficial.

Horseback exercise in moderation is beneficial in many cases, and in every case some form of exercise, either active or passive, should be a regular part of the treatment.

Dissipation of all kinds and all irregular habits should be strictly avoided. I see hundreds of patients here whose chances of recovery are becoming less each day, because of dissipation, irregular habits in regard to eating, sleeping and exercise, lack of employment, and habitual brooding over their condition.

The consumptive who comes here for a cure should come resolved to have a good time, to get all the enjoyment pos-



For Fainting and all sudden attacks of Heart-weakness, give glonoin for speedy effect and one of the heart-tonics every 1 or 2 hours to prolong the action.

In Dilated Capillaries, try hamamelin a granule every hour, limit food and drink, order exercise and free cold bathing with elastic pressure where possible.

sible out of it, to ignore inconveniences, and above all to take care of himself intelligently.

Specific advice as to where one should or should not go is impossible. I should advise in a general way a tent in the mountains in the spring and fall, and a frame house in some camp or town during the rest of the year.

The question of whether one should or should not go to a sanitarium is one which it is hard to answer. The sanitarium offers some very great advantages, while at the same time there is connected with it some unavoidable conditions which are distinctly undesirable in the treatment of the disease under consideration. The advantages briefly stated are: Intelligent supervision, the possibility of securing through the medium of skilled nurses and attendants a strict adherence to best curative measures, thorough sanitation, careful hygienic measures, etc. The disadvantages are: The depressing influence of invalid surroundings; a tendency to destroy or impair self-reliance—an important factor in making a cure—the impossibility of following an occupation

—which ought to be gainful—must be congenial, to be beneficial.

The best time for the patient to come here is in October, November or December. January and February are the months of cold and snow or rain; March and April of winds and sand storms; July and August of rains and floods, and September and October of heat.

The diseases to guard against are pneumonia, which is usually fatal, but can be avoided by proper care in regard to clothing and exposure; a peculiar form of enteric fever, which can be absolutely avoided by distilling water; and smallpox, for which vaccination is the preventive.

Possibly in my care to have prospective travelers hitherward thoroughly understand the unfavorable conditions to be overcome I may have given the impression that the disadvantages overbalance the advantages, but that such is not the case can be attested by hundreds of cured consumptives—of whom I am one—cured by a careful adherence to the laws of health in this marvellous climate.

Silver City, N. M.

Tape-worms all produce a toxin that is absorbed into the blood.—*Riforma Med.*

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Intestinal colic in infants less than six months old, with prolonged crying spells, gives way to quinine more readily than to any other remedy or modification of the food.—*Overholzer.*

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Whenever a man comes to feel he is indispensable, it is time to get rid of him. In fact no one is indispensable.

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I use alkaloidal medication altogether, with astounding and beautiful results, and wish you many long years of deserved prosperity.—H. D. Guidry, M. D., Scott, Penn.

No one fills his place so perfectly but that some others could suggest improvements. And when any one begins to feel that he is indispensable he at once lets up on his efforts, begins to take things easy and put in time criticising others. He speedily becomes "difficult," angular, and to the ordinary problems of business is added that of keeping him in line. It is a common saying at sea, that many a good mate has been spoiled by promotion.

The unpleasant fullness in the head after violent and unaccustomed exercise subsides promptly after a granule of Veratrine, repeated is necessary.

MUSHROOMS—WHOLESOME AND POISONOUS.

By W. F. Waugh, M. D.



THE occurrence of numerous cases of mushroom poisoning in this neighborhood leads me to believe that this topic may be of some interest to our readers. The mushroom is one of the most wholesome, nutritious and palatable of foods. If heat and moisture abound it grows in profusion. It would seem to the believer in Divine Providence almost or altogether a crime to neglect this delicious food so freely and bountifully provided; yet the actual consumption of mushrooms does not amount to one-tenth per cent. of the supply, even in the suburbs of this great city.

This neglect is due to fear of the poisonous varieties, commonly known as toadstools. And yet, these are comparatively rare. I have never been able to find any poisonous amanita in Ravenswood, although I have found and eaten at least twenty varieties. In the report of the State Botanist of New York, 63 edible species of mushrooms are enumerated, three poisonous ones and one "unwholesome." "All the dangerously poisonous mushrooms found in this country belong to a single genus, *Amanita*." Some others cause nausea or vomiting, or are unwholesome or unpleasant in flavor.

The silver spoon test is wholly unre-

liable, and the only reason it has enjoyed confidence is that poisonous mushrooms are so rare. The only sure rule is to learn to recognize each mushroom, and eat none you are not sure of, as to name and quality. But the "mushroom crank" will not obey this, and will eat any strange fungus unless he is sure it is a bad one.

All known morels and puff balls are wholesome. Puff balls are only edible when soft and white. No mushroom that is infested with insects should be eaten. Not even if only in the lower part of the stem; they spoil the flavor. Dry mushrooms contain from 20 per cent to 50 per cent. of nitrogenous matter, hence are to be ranked with beans and cheese in point of nutritious value. This would indicate the wisdom of eating them sparingly. A man who eats a pound of cheese would expect consequences. A pound of mushrooms would likewise entail unpleasant results. Various mushrooms require different methods of cooking, but this is too wide a field for us to enter here. Large ones may be broiled, tough ones cut up and stewed, while the little inky coprini and other small sorts may be utilized for mushroom catsup.

The fly amanita is found from spring to frost, more commonly after May, in many parts of the United States. It grows from four to six inches high (Spaulding says four to sixteen), the cap three to six or even eight inches in diameter, one-half inch thick, covered

Always keep iodized calcium on hand. When you want it for a case of Membranous Croup, you want it in a hurry. It is good for many other things—all iodine indications.

The granules of Arbutin neatly replace the whole group of plants of which this glucoside is derived—*uva ursi*, *pipissisewa*, *pareira*, and *buchu*.

with many warts or floccose scales, white or yellowish, in the young plant arranged in concentric rings. The cap may be white, yellow, orange, scarlet, or bright red, fading at the margin as it ages, striate at the margin or not.

The stem is pithy or hollow, covered with soft, flexible shavings, white or yellowish, swelling at the base into an irregular bulb with short stubby projections, covered with concentric scaly rings, but with no distinct cup. It has a distinct collar. The plant is singularly free from decay and parasites or larvæ. The gills are white or yellowish, varying in length, the shorter ending vertically toward the stem. Except in the white form the flesh is yellowish under the epidermis.

The spores are white, broadly elliptical, .0003 to .0004 inches long. The young plant is egg-shaped, then dumb-bell. The fly amanita grows in pine and oak forests, open places and pastures, along roads and field edges, in poor gravelly soil. It persists in the fall after the edible amanitas have ceased. It is the most common of the poisonous mushrooms.

Dead flies may be found in abundance around it. It has been suggested that the toxic quality may be eliminated by peeling off the top, by long boiling and throwing away the water, or soaking in vinegar or salt water; but it is best to take no chances. The toxic principle of this mushroom is muscarine.

Far more dangerous is the amanita phalloides.

The phalloid amanita occurs from July to October, being common in late autumn; in woods, especially pines, in open places and bushy pastures, sometimes on lawns or the borders of woods.

The cap is three to five inches in diameter, 1-3 to 1-2 inch thick, smooth even on the margin, satiny, white, straw, greenish, light brown, or yellow, spotted if growing in dense shade, free from warts and striæ. In the brown ones the center may be nearly black. These occur in cool mountain woods. The stem is three to eight inches high, the length equal or exceeding the width of the cap, white, nearly smooth, collared, the color of the cap but lighter, pithy when young but hollow when older. It ends abruptly in a flat bulb one to one and one-half inches in diameter, loosely enveloped in the cup, the remains of the volva or wrapper, which is split or notched. The spores are white, globose, .0003 inches in diameter. The gills are white persistently, broad, rounded at the end next the stem, from which they are free. In the button stage the plant is egg-shape, the sheath adherent to the collar.

The phalloid amanita contains not only muscarine but a far more deadly agent, phallin. This is a toxalbumin, resembling serpent venom in its power of dissolving the red blood-corpuscles.

Phallin is coagulated and rendered inert by a temperature somewhat below that of boiling water. Salt water dissolves it readily. Sometimes the mere handling of the plant has caused serious trouble. One-third of a raw cap killed a boy 12 years old. Phallin dissolves the red blood-corpuscles rapidly, and the serum transudes into the alimentary canal. The symptoms appear nine hours after eating, with abdominal pain, cramps, convulsions or lockjaw, sometimes tetanoid spasms. The pupils may be dilated, pulse weak, slow or fast. Nausea, vomiting, rice-water stools follow, and death in two to four days.



Copper arsenite is a valuable medicine for small and frequent dosage, but apt to disappoint if administered clumsily.

Diastase is now produced in such a concentrated form that three granules after a meal prevent indigestion of starches.

The vernal amanita is probably a variety of the phalloid, differing in the more persistent and closely sheathing cup. The cap is viscid when moist. It is equally dangerous, and is probably the most common cause of fatal mushroom poisoning.

The amanita frostiana resembles the muscaria, but is much smaller. It has no cup, the base of the stem is not scaly, but slightly margined by the remains of the wrapper. The stem is white or yellow, the gills free from the stem. "If the cup of a yellow amanita is present, the plant is safe; if absent, it is poisonous."

It is said that poisoning about Chicago is all or nearly all due to the lepiota morgani, the only green-spored mushroom known. Take a mature plant, cut the stem close to the cap, and place the latter, gills down, on a sheet of paper. In a few hours there will be a deposit of spores. If a white-spored variety is being tested, lay on a sheet of black paper. This lepiota does not cause death, but severe vomiting and purging.

The emetic russula is a dangerous plant. The cap is rosy to rich red, flesh thin, margin furrowed with parallel lines, center depressed in old plants, cap three and a half inches in diameter, gills white, uniform, sometimes unequal, broad and brittle; stem rosy, swollen near base, two and a half inches long; spores white; flesh white, pink under skin, very fragile; taste acrid and biting. It is found in damp meadows, woods, grassy places, and under pines and firs, from July to November.

The bitter boletus is not a gill but a pore fungus. The cap is one and a half to four inches broad, fleshy, smooth, grayish brown, buff, reddish brown or tawny; the flesh white, the taste bitter;

the stem is reticulated at the top; spores pink. The flesh when cut soon becomes pinkish. It grows about decayed stumps and trees, from July to September. It is classed as unwholesome rather than poisonous.

The following rules should be observed by all eaters of wild mushrooms:

1. Obtain the best accessible books on fungi and do not eat any unless you can recognize them as harmless.

2. Never eat any fungus raw, worm-eaten, water-soaked, decayed, withered or containing traces of insect attack.

3. Have the mushrooms cooked, and as rule eaten, the day they are gathered.

4. Do not eat more of the mushrooms than you would of cheese, or pork and beans.

5. Watch especially for the fly amanita with its corky top, white spores, hollow or stuffed bulbous stem, with ring-like scales, white gills; and for the phalloid amanita with its flat, sheathed bulb, white spores and gills; white, brown or greenish cap, hollow stem.

6. Thorough cooking destroys phallin, which leaves us only muscarine to deal with as a poison. For this atropine is a perfect antidote, so that with atropine on hand no one need die who eats any kind of mushroom or toadstool if well cooked. Soaking repeatedly in salt water dissolves out both phallin and muscarine.

7. If decayed or otherwise unwholesome mushrooms are eaten, the symptoms of cholera morbus may supervene. In all cases of mushroom sickness, therefore, empty the stomach by lavage or emetics, clear out the bowels by a dose of salts or oil, bring about reaction by repeated doses of hot water with camphor, capsicum or other stimulant, in-

It seems that a speedier effect is obtained from the valerianates, of atropine, strychnine, caffeine, etc., than from any other forms.

Aspidospermine only fails when given too gingerly. Give two granules every five minutes for dyspnea.

ject atropine in doses of gr. 1-100, repeated till full effects are manifest (dry mouth, red face, dilated pupils), and sustain the strength till the muscarine is eliminated in the urine, which will require but a few hours.

In poisoning by phallin there is no antidote, but possibly life might be saved by the above treatment, with oxygen inhalations to combat the asphyxia.

Muscarine, $C_8 H_{15} N O_3$, is an alkaloid so closely resembling pilocarpine in effects that Cushny describes the two in unison. Muscarine causes free flow of saliva and tears, vomiting, lessens the force and frequency of the pulse, dyspnea, muscular debility and death by paralysis of respiration. The pupil is tightly contracted, dilating just before death. The cardiac diastole is very much prolonged, and diastolic arrest occurs after lethal doses from excitation of inhibition. In this respect muscarine resembles aconitine. The vasomotor nerves are paralyzed. The musculature of bowels, bladder and spleen are tetanically contracted, the abdominal secretions greatly increased. So much Wood tells us.

Cushny says that the symptoms of muscarine poisoning begin with marked salivation, followed by excessive perspiration and tears; then nausea, retching and vomiting, abdominal pain, violent peristalsis and watery purging. The pulse may be accelerated or slow and irregular; pupil contracted, sight accommodated for near objects; respiration often quick and dyspneic, with mucous rales; giddiness, confusion of ideas, respiration slowing, great muscular weakness, consciousness perfect till death from respiratory failure. The salivary, lachrymal, sweat, buccal mucous, gas-

tric, intestinal, nasal and bronchial glands, and the pancreas, secrete copiously. The ear-wax is also produced more freely. The solid constituents of these secretions are also but somewhat less freely increased. Bile, urine and milk are unaffected directly, but reduced by the loss of fluid elsewhere. The previous administration of atropine prevents the increase of all these secretions by muscarine, showing the action of the latter to be not on the secretory cells, since atropine paralyzes the secretory nerve-ends and not the cells. Section of the secretory nerves does not affect the action of muscarine. The action is therefore in the secretory nerve-ends. After lethal doses this stimulation ends in paralysis, but in man death from asphyxia occurs before this can be manifested.

Nausea and gastric discomfort occur early, followed by retching and vomiting; the intestines soon follow in activity. Even after emptying the bowels painful straining continues. The spleen, bladder, bronchi and perhaps the uterus also contract. Muscarine acts on the ciliary muscle more readily than on the pupil; intraocular pressure is reduced after a slight preliminary increase. Muscarine stimulates the vagus-ends in the heart-muscle, slowing and in time stopping it. The blood-pressure falls and cerebral anemia ensues. The stimulation of inhibition is very frequently absent in man, when the pulse is accelerated and blood-pressure rises, with palpitation and cardiac discomfort, and dilatation of the facial cutaneous capillaries. Small doses do not affect respiration. Pulmonary cedema rarely occurs. Tremor and hic-cough have been noted.

A flushed face, bright eye and full temples, with mental excitement, call for Gelsemine to effect; a granule every half hour.

For Bilioussness from sluggish liver or over-eating, give a granule of emetin every hour until slight nausea supervenes.

Luchsinger, however, attributes the cessation of cardiac action to a direct effect upon the muscle, as sections of the heart not under ganglionic influence are similarly affected. Irritation of the vagus-ends causes the slowing pulse and lessened vascular tension; and to a similar nerve-end irritation the stimulation of the secretions and of the gastro-intestinal movements is attributed. Myosis does not occur when muscarine is applied directly to the eye. The respiration is at first faster and dyspneic, then slower; and this is due to irritation of the respiratory center. Muscarine does not affect the brain, cord, peripheral motor nerve-ends, nor the voluntary muscles. Reflexes remain after voluntary motion has ceased.

A hypodermic dose of 0.001 to 0.003 (gr. 1-67 to 1-22) causes profuse salivation, cerebral congestion, rapid pulse, redness of face, vertigo, oppression, anxiety, nausea, colicky pain and borborygmi, spasm of accommodation, and sweating, especially of the face. Muscarine is very soluble in water and in alcohol, but not in ether. It is difficult to get any but a transient effect from medicinal doses, as it is so rapidly eliminated by the kidneys. The effects, when the fly amanita is eaten, are manifested in about three hours.

Muscarine has been scarcely used as a medicine, though Schmiedeberg suggests it may be employed to replace pilocarpine, whose effects it closely parallels. In Siberia a mushroom is highly prized as an intoxicant; so highly that after a man has enjoyed its effects the poorer neighbors are said to drink his urine and thus obtain a second intoxication. This is not due to muscarine but to some unknown agent.

Recently a friend brought me some very large mushrooms, the full-grown being ten inches in diameter and over an inch thick. The cap was rough, studded with triangular brown bits and fluffy, the gills white with greenish tinge, the stems smooth and fibrous, expanding into a stump-like base, with no trace of a sheath. The plant was about eight inches high, and the mature forms full of maggots, the stem hollow and riddled with insects.

As it did not correspond with the description of any amanita, I selected a young specimen, free from parasites, and had it cooked, I ate a bit about as big as a quarter dollar. In three hours I began to feel cold sweat starting out, with some uneasiness in the stomach, cold skin, face deadly white; vomiting and purging followed, perfectly painless, profuse serous stools, skin icy cold, weakness, some cramps in left calf, mind perfectly clear. Vomiting was painless and really almost devoid of nausea, ceasing when the stomach was empty. The purging continued through the day, with rice-water stools. The mind remained perfectly clear, with no vertigo, cerebral fullness or confusion. I knew that in atropine I had a sure antidote and hence felt no uneasiness. I can not but think that if mine were a mild case of muscarine poisoning, some of the symptoms described are attributable to fright. I took a very small dose of atropine, walked home two blocks and rested the balance of the day. Two days later my weight was five pounds less than it was the day before I ate the mushroom. Profound weakness followed, which passed off very slowly; in fact, two weeks later my strength is not wholly restored.

Dr. Clay has examined the mushrooms



Autotoxemia accounts for 40 per cent. of the fever. Give Salo-sedatus and get that off your hands; the rest is easily managed.

In congestive conditions of the uterus and ovaries, anemonin has proved quite effective. Dose, one granule every hour until relief.

of which I ate a specimen, and failed to detect muscarine by the usual tests. From the fact that most of them were well-populated with various parasites, I am at a loss to know why I should have suffered. And surely, never did I experience so thorough a purgation, with such complete absence of distress or pain. If the cathartic principle could be isolated it would be the ideal, never before discovered.

A very remarkable symptom I noted quite accidentally. The epididymus was

so tightly contracted that it felt like a tubercular tumor, and as if a ligature were drawn tightly between it and the testicle. There was not the slightest pain, tenderness, excitation or discomfort of the parts attending this. I have not found any reference to this phenomenon in my researches. I would infer that in medicinal doses muscarine might prove of value as a remedy for varicocele.

Chicago, Ill.

STAMMERING AND STUTTERING.

By W. F. A. Schultz, LL. B., M. D., D. M. D.,

Manager of the St. Louis Stammering and Stuttering Institute. Formerly Chief of the Oral Clinic of the Missouri Medical College.

THESE singular phenomena of utterance, the characteristic of irregular or abnormal speech, occurred probably as early, as did the sounds of language that



W. F. A. SCHULTZ,
LL. B., M. D., D. M. D.

gave significance to thought in primitive mankind. On investigation we find mention made of them in ancient legends and in the Scripture writings, reciting instances where ancient teachers, apostles and dis-

ciples were affected by some disturbance in the function of externalizing speech. More particularly reference is made in personal memoirs and biographies of some illustrious men, who while suffering mental and moral embarrassment arising from these speech-defects were at times almost denied the "full converse with their fellowmen."

It is our desire to turn your attention

briefly to consider first the definition of the terms "stammering" and "stuttering" as employed in this monograph and as strictly recognized by the older writers on the subject. At the conclusion of the paragraph I shall attempt to give the characteristics of their differentiating features.

Stammering is unnatural speech, characterized by imperfect articulation, or involuntary pauses of individual sounds during an attempt at utterance. Stuttering is an inability to connect consonants with succeeding vowels or syllables, associated at the same time with spasmodic repetitions of the initial sound of a word in attempting to speak. The distinction between the two lies in that the stammerer experiences difficulty in pronouncing individual letters or words; whereas the stutterer cannot effect syllabic combination in words owing to the repetition of the initial sound.

Hoping to have given the reader an intelligent definition and an idea of the

The combination "Heart-Tonic" is an admirable combination, by which the heart's force is increased and arterial tension relaxed.

For Biliousness from sluggish liver or over-eating, give a granule of emetin every hour until slight nausea supervenes.

differential characteristics, which might have the merit of furnishing something that is valuable in the way of practical clinical aid, we pass on to the discussion of the etiology and pathology.

In attempting to do this, the writer will not offer a retrospective view of the confused and variegated conclusions of earlier writers, who in their endeavor to offer a theory, photographed multiples of hypothetical factors as underlying the probable etiology. Nor is it necessary to portray their conceived pathological dogmas. They are obsolete. We make a radical departure from antecedent theories, believing ourselves justified from a neuropathological point of view, which enables us to gain an access or insight into the obscure morbid nature of the diseases.

Stammering and stuttering are both functional disorders of the organs engaged in the externalization of speech. As far as neuropathological explorations were possible to be made, no tissue-lesion of the parenchyma of the brain has yet been found in evidence. In this respect organic sensory and motor aphasia stand diametrically opposed. We know positively, trusting to our memory of encephalic topography of the language area of the brain, that histological perturbation or molecular disintegration of the basic cellular constituent in this region, causes permanent loss of the function to externalize speech; as contrary to the symptoms manifested in these functional habits capable of being remedied. We know that dissolution of the inferior parietal gyrus stigmatizes an inability to interpret visual words, i. e., word-blindness. Dissolution of the superior temporal gyrus prevents an ability to

comprehend spoken words, i. e., word-deafness. Dissolution of the inferior frontal gyrus, more accurately, the convolution of Broca (left side), results in an inability to articulate spoken words—muteness. But in stammering, as we have already mentioned, no such structural catastrophe in the delicate brain mechanism is found as the *corpus delicti*.

According to the situation of our viewpoint then, the cause of these bi-stigmatic functional motor impediments of speech arise either from an embarrassment of the cortex area, or from an infringement upon the subcortical stratum of the zone of language by a circulatory or psychological embezzlement emanating from the conceptive ideational center or from the irregular behavior of the kinesthetic association of cells; or by the associating pathway of nerve fibers, issuing from one allocation to find receptivity in another. Furthermore, there exists a faint possibility that the respiratory nucleus in juxtaposition with the fourth ventricle may also be implicated, owing to the fact that respiration is both conscious and unconscious.

Recently some laryngologists gave us valuable assistance from their laryngoscopic observations, giving us a careful nosographic report of the pathological status in the throat, and likewise drawing a delicate comparison between the condition previous and the sequelæ subsequent to the obliteration of the acquired morbidity, with the gratifying result of more enriching our knowledge about the subject. And they also attested the fact that inflammatory or neoplastic assault upon the benign tissue does aggravate the attack; providing they are not the sole factor, in



For the relaxed form of hemorrhoids with rectal prolapse, Vaughn's Anticonstipation granules, one every waking hour, prove very effective.

For Insomnia with disturbed equilibrium of the circulation, give three Dosimetric Triad granules on going to bed. Try it also if you have "caught cold." It's a sure abortive.

producing some forms of ataxic aphasia. Thus the sum total of the investigations go to show that, while the peripheral metamorphoses of the tissue aggravate much in impairing the operation of the organs yet does the etiological or augmentative factor reside in the brain.

Having thus carefully stated to our readers the chief part and interest of our topic, there remains for us the duty of giving a hasty outline of the general principles involved in the treatment. Let it be plainly understood that, within the limit afforded us here we cannot possibly present the subject with even meager satisfaction because of the vastness and multifariousness of the therapy concerned.

It is recognizably conceded, we hope, that in order to be effective in eradicating stammering and stuttering the patient has to submit to the care and instruction of a skillful scientific practitioner under severe discipline, and in an institution especially equipped and managed for the purpose.

Men who are to be entrusted with the discipline of these unfortunate nervous individuals should necessarily possess a high degree of skill and medical learning. For, as these affections partake frequently of symptoms of other nervous disorders, it is essential to diagnose correctly and prescribe such remedies as are prompted by such indications.

The essence of the treatment is eradicated. The starved, enervated nucleated molecule of gray brain substance impaired by exhaustion of nerve energy, needs nerve tonic to revivify, strengthen and rehabilitate the conducting apparatus and the centers of the brain. The general health is to be ele-

vated to a normal plane; and abuses and habits interdicted and controlled. In short, the treatment comprises medicinal, hygienic and psychic measures, and also respiratory and diatonic calisthenics. Each one of these is to find a place in the curriculum according to necessity and indication. If this course is carefully pursued the reward will follow the exercise of the effort, by the removal of the impediment and by establishing perfect normal speech.

St. Louis, Mo.

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It is advisable for a clear appreciation of the foregoing article, to refresh one's memory about the anatomy of the brain as laid down in more recent manuals of anatomy and physiology. For this purpose we can best recommend "The American Text-book of Physiology," two volumes; and "The Nervous System," one of Saunders' Medical Hand Atlases, both which were reviewed in these columns during the year. If the reader should fail to grasp the author's idea fully he should not blame him, but himself as to memory, if he does not refresh it.—Ed.

The *New York Tribune* is authority for the statement that the liquor traffic costs more every year than our whole civil service, our army, navy and Congress including the river, harbor and pension bills; all we pay for local government; all national, state and county debts, and all the schools in the country. "In fact," says the *Tribune*, "this country pays more for liquor than for every function for every kind of government."

For the Itching of Jaundice give pilocarpine enough to cause slight sweating. In how many other forms of itching is it effective?

In Subinvolution, enlarged spleen and other chronic enlargements of glands or tissues, give berberine gr. 1-6 three to ten times daily.

SELF-TREATMENT OF NASO-PHARYNGEAL CATARRH.

By N. R. Gordon, M. D.

THE physician has long since learned that in order to attain success in the treatment of nasopharyngeal catarrh, the patient must have some effective self-treatment.

It is the object of this paper to give in detail our method of local self-treatment, the result of many years' experience in the special practice of diseases of the upper respiratory tract.

In the consideration of this subject, it is important to bear in mind the extent and location of the affected area; that it is *ail*, not part of the mucous membrane lining the nasal, post-nasal and pharyngeal surfaces, and that from its location it is difficult to apply local remedies thoroughly.

What to apply and how to apply it, is a leading question in the local treatment of nose and throat. We will discuss the merits of the various remedies only in a general way, and that to give what our experience has proven beneficial and worthy of the endorsement of every physician, who desires success and the gratitude of his patients.

Astringents, as astringents, *per se*, we have long since discarded, and we trust no one who reads these lines, is so far in the "horse-car age," as to use them for purely astringent purposes, for they are only a "delusion and a snare."

Antiseptic remedies, such as sodium



N. R. GORDON, M. D.

biborate, or sodium chloride, in combination with some of the aromatics, as eucalyptol or menthol, and water, from an ideal detergent and medicinal application to the nasal membranes.

Dobell's solution is good of itself, but, improved by the addition of a small amount of glycerin, the modified form of the same, as recommended by Dr. Seiler, is a most valuable application.

An aqueous solution containing an antiseptic, sufficient aromatic to give a pleasant stimulation with glycerin, enough to make it about the specific gravity of the blood, bland and soothing, is an application that will be efficacious in the majority of catarrhal cases. Always avoid the use of strong irritative remedies to the nasal membranes. The mild and non-irritative local remedies are the ones that give the most satisfaction to both patient and physician, and can be used in atrophic as well as hypertrophic catarrh, as a cleansing and remedial agent.

The aromatics incorporated with a hydrocarbon oil, form an efficient curative remedy. The oil alone is curative, but as sold on the market under various names, of which "albolene" is representative, it is deficient in density, and does not adhere to the membrane sufficiently long; this difficulty is overcome by the

In all Fevers 40 per cent of the symptoms are due to autotoxemia and are removable by emptying the bowel and rendering it aseptic. This reduces the attack of the category of mild or abortive cases.

For Atonic Dyspepsia and general debility of the digestive apparatus, give a granule or two of quassin before meals; the triple arsenates may well be added after eating and Saline Laxative mornings.

addition of vaseline, giving it about the consistency of olive oil, which will improve its staying qualities, and of course its curative effect.

Having selected the remedy, how shall we apply it? By atomization, for by this method alone we can reach all the affected area, avoiding if possible any procedure that will make the patient gag or retch, which will have the effect to annul the value of the treatment.

It is a deception to the patient and a reflection upon our skill, to presume that throwing a spray into the anterior nares alone is a full treatment. It is only a half treatment or less, because it reaches only about half of the affected surface. Indeed, the post-nasal treatment when properly made is more effective than the anterior nasal treatment.

Often a physician will prescribe a valuable remedy, and say to the patient, "Use this with an atomizer." The patient knows nothing of atomizers or their use, but takes what the druggist gives, tries to use it, makes a failure of it, and sets it aside with a feeling of disgust. The failure is due to the neglect of the doctor, who should designate the kind of instrument, and instruct him in the use of it until fairly proficient.

The writer pursues a plan something like this for a home treatment:

•Having selected the remedy to be used, we take a De Vilbiss atomizer, for with this one single instrument the entire affected area can be reached; with other atomizers the same result can be obtained but not so conveniently and effectively.

The patient sits erect, holding the instrument on the horizontal, the point placed in the anterior nares. The spray

is forced along the floor of the nasal passage, the patient inhaling at the same time the bulb is compressed. Then holding the head in the same position, lower the bowl of the instrument about thirty degrees so as to drive the spray in the direction of the superior turbinate. This continues the treatment anteriorly.

Now hold the tongue down with a depressor, pass the distal end of the spray producer with the reversible tip directed upward until it is between the pendant palate and the posterior wall of the pharynx; withdraw the depressor and close the teeth on the stem of the instrument; then remove it, and at the point where the front teeth rest, make a small notch with a file.

Then instruct the patient to pass the instrument on the dorsum of the tongue, holding it on the horizontal until the front teeth lodge in the notch previously made, close the lips and breathe; compress the bulb and the spray will pass easily into the post-nasal cavity; lay great stress on the breathing—breathe rather rapidly—this has the effect to relax the soft palate, divert the mind of the patient from the throat, and open fully the passage into the post-nasal cavity.

The patient soon learns to hold the instrument steady with the aid of tongue, teeth, lips and hands, so as to make the treatment without retching or gagging.

For treating the tonsil and post-pharynx, open the mouth wide and medicate the parts directly with the spray in a horizontal direction.

For reaching parts below the base of the tongue, turn the reversible tip so



Doctor, can you abort Typhoid? That is what thousands of physicians are doing who are not professors in colleges, but have learned the meaning of the maxim "To clear out and clean up."

I cannot get along without the CLINIC. I think it improves steadily which is saying a great deal as it has been good since its first number.—W. Charles Carroll, M. D. Kansas City, Mo.

as to throw the spray at an angle of forty-five degrees from the horizontal, and with the extremity of the instrument over the base of the tongue, and resting lightly on the anterior part of the tongue, with the mouth partly open, inhale. This will avoid the direct impact of the spray on the laryngeal surface and effectually medicate all the diseased surface.

For bronchial irritation the application can be made in the same way, or by inhalation through the nasal chambers.

Impress upon the patient the necessity of relaxing the throat and breathing naturally and easily.

An application made in this manner, free from retching and gagging, which in the majority of cases can be accomplished after a few trials, should give a sensation of comfort and relief.

Treat twice daily, in the morning and just before retiring. Most catarrhal patients breathe through the mouth during sleep; this must be stopped. Nasopharyngeal catarrh is never cured so long as the patient breathes through the mouth; indeed, prevent mouth-breathing and you have made a long step towards a cure.

For this purpose we use a device made of flexible celluloid, worn during sleep, which effectively cuts off oral respiration.

Doctors, give your patients the local treatment outlined above, and you will soon have a well pleased clientele, and a larger bank account.

The surgical treatment of nasopharyngeal catarrh is reserved for a subsequent paper.

Springfield, Ill.

THE MEDICAL TREATMENT OF FEMALE DISORDERS.

By Finley Ellingwood, M. D.



THIS IS A common practice to treat a large majority of the diseases of woman by surgical methods, and to class as incurable those that cannot be so treated.

To those who have made a practice of administering medicines for the relief of the many disorders peculiar to the female sex, and have studied these remedies with reference to their most direct action, there has been a growing belief, which has ultimately developed into a positive faith, that medicine is marvelously potent in relieving the distressing pains consequent upon disordered functional operations of the female organs, and in correcting very many of the

diseased conditions of the organs themselves.

Without further introduction, I assert that medicines administered according to their specific indications will so prepare women for confinement, that *an easy labor will result in at least eighty per-cent of the cases where slow, difficult and painful labors had previously been the rule.* This applies only to those cases where there are no abnormalities, malformations or deformities. A course of this character will prevent very many of the disorders, displacements and subsequent ailments, which are so common among child-bearing women.

I cannot here outline the entire course.

Acne disappears when ergotin enough is given to contract the dilated capillaries, leaving the skin smooth. Berberine gr. 1-6 three times a day and upwards accomplishes this and still better.

For Headaches due to uric acid, especially when biliousness is present, give a granule of colchicine every hour until slight nausea occurs. For uric acid in general, colchicine is an effective remedy.

Attention to the digestive apparatus is of first importance, and patients who have a tendency to the uric acid diathesis should eat sparingly of nitrogenous food. They should drink freely of water, hot or cold, and keep the urine diluted. The nervous system must be watched, no spinal irritation permitted, and general nervous irritability must be allayed. Where there is mental depression and despondency, with constant anticipation of serious results, small doses of *pulsatilla*, four or five times daily, is the specific remedy. If these conditions are accompanied with hysterical excitement and great restlessness and insomnia, *hyoscyamus* should be given in conjunction with it.

If there be constant muscular aching with irregular pains, especially if uric acid is present in the urine in excess, two or three drops of the tincture of *cimicifuga*, every two hours until the condition is relieved, is the remedy. *Mitchella repens* is a royal remedy in the most of these cases. Ten drops of the fluid extract can be given three or four times daily during the last three or four months of the pregnant term. It may be given alone if none of the above specific symptoms are present, and it need not be discontinued if the above-named remedies are indicated. During the last two weeks of pregnancy it may be given in half-teaspoonful doses every two hours if previous labors have been tedious.

This remedy may be made into a hot infusion and drunk during the progress of a severe labor, often giving immense relief to the patient, with no unpleasant results.

The best remedies we have with which

to overcome uterine inertia, to produce normal, regular uterine contractions, are *macrotin* in from three to five-grain doses, and *mistletoe*. The latter agent, being given during the progress of the labor as needed, sustains the uterine action in a natural, uniform and rhythmic manner. It prevents post partum hemorrhage as satisfactorily as *ergot*, and promotes normal uterine involution. An excellent remedy for post partum hemorrhage is *mangifera indica*. It should be given when there is threatened flooding, in small teaspoonful doses every ten or fifteen minutes.

Viburnum prunifolium is well known as a remedy to prevent abortion, but it fails often because not given in large enough doses. A teaspoonful of the strong fluid extract, every half hour, is needed if there is immediate danger. In cases where abortions are habitual its use should be begun from two to four weeks before the accident is anticipated, as the accident usually occurs at the same month of fetal life. Fifteen minims of the fluid extract may be given four or five times daily. As the period approaches the patient should be put to bed and kept quiet, on a mild unstimulating diet, and the bowels kept in a soluble condition by an unirritating laxative, only occasionally given. The dose should then be increased to half a teaspoonful four times daily, and if regular pains appear, or there is a slight hemorrhage, it should be increased to dram doses every half hour. When the symptoms have passed the size of the dose may be lessened and the intervals lengthened for two or three weeks.

In spasmodic dysmenorrhea, or where



Obesity may be easily reduced by closely limiting the amount of fluid taken and giving seven granules of *phytolaccin* a day; diet, just enough food and no more. Only one kind of food at each meal.

For Atonic Dyspepsia and general debility of the digestive apparatus, give a granule or two of *quassin* before meals; the triple arsenates may well be added after eating and Saline Laxative mornings.

there are any pains of a spasmodic character in the womb—erratic pains, irregular as well as regular—viburnum opulus is a remedy of value. To half an ounce of the fluid extract add half a pint of boiling water. Of this, during the pain or just preceding it, give a tablespoonful every half hour or hour, lengthening the intervals as the pain subsides. If the pain is anticipated, the agent may be given in twenty or thirty minim doses for a few days preceding the anticipated time. This agent will control after-pains in the above doses quite effectually.

Gelsemium is often given for after-pains, and I have never known it to fail in relieving the pains more or less speedily, yet I do not advise its use. It suspends the pains, but it accomplishes this result by suspending the normal muscular uterine contractions, and is usually followed by an increase of hemorrhage, which may be severe and even dangerous. It is a specific remedy for ovarian neuralgia, and for neuralgic and spasmodic dysmenorrhea.

We have several remedies that have overcome sterility, where the fault was inactivity of the ovulating function, or where mild congestions have interfered. Among these are aletris farinosa, senecio aureus, pulsatilla, helonias dioica and small doses of belladonna, continued over a protracted interval.

The indications for aletris, whether sterility be present or not, are general weakness of the uterine structures, a general lack of tone in the reproductive organs, and feebleness induced by overwork, too frequent child-bearing or oversexual indulgence. When from great

weakness there is deficient menstruation, or a pale watery flow at long intervals, if given in combination or alteration with iron it will act promptly and satisfactorily.

Senecio aureus is an excellent general regulator of the menstrual function. A general out-of-tone condition of the uterus and appendages, a relaxed condition of the uterine supports, will be relieved by the use of senecio; and mild forms of displacement may be rendered more amenable to treatment by this remedy. It shows its results more quickly where there is a positive irritation of the organs with general passive hyperemia. The results occur rather slowly but are permanent.

When the patient complains of a dragging sensation in the lower abdomen, with an inclination to pull up, or support the abdominal or pelvic contents, helonias dioica in from two to five-drop doses will produce relief, and correct this condition if resulting from misplacement. The conditions of course will be likely to return if mechanical replacement is not resorted to. However, I have observed this: Uterine misplacement is not discovered usually until it has produced engorgement, irritation and perhaps local inflammation with the usual concomitants. There were also probably other pathologic factors in the case which sustained an etiologic relation to the misplacement. Let the uterine misplacement be overcome by proper manipulation and tampons (I have no use for pessaries), and then administer the correct remedies persistently to cure the disease present, to relieve the engorgement and irritation; and the patient



In Gall-stone and Renal Colics, the best treatment of the paroxysm is glonoin, hyoscyamine and strychnine arsenate, a granule each every ten minutes until effect. Try it in all cramps and colics.

In treating Alcoholism, when the patient can't sleep, give one grain of emetin on going to bed, swallowing the tablets whole without any liquid. Whether it stays down or comes up it will do good.

will subsequently complain but little if any of the displacement. It is not so much the displacement, as the pathologic conditions induced by improper care and over-work after the displacement occurs, of which the patient complains. I am confident that the supports of the organs are strengthened by this remedy and that the tone of the relaxed parts is greatly improved.

I believe displacements are present in some individuals a long time without causing the patient any inconvenience which in any marked way suggests their presence. I knew of one patient who denied ever having experienced any symptoms of uterine disease, who had had a double laceration of the cervix uteri for at least seven years.

A good remedy for suppression of menses from exposure to cold is *polygonum punctatum*. It may be given in 30-drop doses every two or three hours. It is best given in hot water. It does not appear to exercise any influence on the pregnant womb, as I have given it during pregnancy without results. It may be given between the time of the periods or during the time. It also relieves nerve irritation, and mild hysterical phenomena present at that time. Shortly after confinement, when the lochial discharge is suppressed and there is some fever, with restlessness and irritation, give dram doses of the fluid extract of *lenurus cardica* every hour or two until the discharge is normal. Indications for other remedies may be present, but this remedy will not conflict with any of them. I have known only good results to come from its use.

The tiger lily, *nuphar alba* and *nuphar lutea*, are all excellent remedies in the treatment of inflammations of the womb

or cervix. They can be given internally and applied full strength on tampons locally, with excellent results.

Caulophyllum is a remedy for young girls who have difficulty at the time of puberty. It assists in starting the menstrual function normally and in preserving a normal healthy condition of the organs. It overcomes amenorrhea and corrects acrid and irritating discharges. If given during the last three months of pregnancy it gives relief from many of the distressing and irritating symptoms often occurring at that time, leaving the organs in an excellent condition after the labor; this facilitating a good getting up.

I have during the past summer been prescribing the homeopathic mother tincture of *fraxinus americana*, for chronic enlargements — hypertrophy of the womb — of a non-malignant character. I have given it in ten-drop doses every two or three hours with very good results. In cases where *aletris*, or *helonias*, or *senecio*, or any other remedy was indicated, I have made combinations based upon the specific action of the remedies, that have been satisfactory in cases so treated. While I believe in giving single remedies with reference to their directest action when possible, there will be found often indications which will suggest two or three of these remedies in combination. Such combinations carefully made will often produce the most excellent results. *Aletris cordial*, *Hayden's Viburnum Compound* and *Pierce's Favorite Prescription*, are such combinations. *Lydia Pinkham's Vegetable Compound* is made of these remedies. A correct knowledge of each individual remedy, together with a careful




In all Acute Catarrhs of the respiratory mucosa, begin at once with calcium iodized, one to three tablets every ten minutes, and note how quickly the symptoms disappear.

In Eructations of gas, give capsicin to tone the stomach and diastase to aid the digestion of starch. Try Grape-Nuts or Malta-Vita and cereal coffee for breakfast.

study of the exact symptoms, will enable the intelligent, rational physician to prescribe with accuracy, and with the expectation of sure results where remedies like the above are so prescribed. Much better results can be attained by

correctly adapting a remedy to the exact conditions, than by giving an arbitrary compound for all conditions. The latter method suggests ignorance and indolence on the part of the prescriber. Chicago, Ill.

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| <p>A THEORY OF THE ACTION OF SALINES ON THE BILE, THE BLOOD, THE BRAIN AND THE NERVES.</p> |  W. C. BUCKLEY, M. D. | <p>Also Diseases which can be Prevented and Cured by their Habitual Use.</p> <p>—</p> <p>By W. C. Buckley, M. D.</p> |
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1. ON THE BILE. In the morning on rising one experiences a certain heaviness or drowsiness, often indeed a feeling of nausea, which is attended with nervousness and depression. The movements are undecided and the head light and embarrassed. If ever so small the evening meal has been, it often has not been thoroughly digested, therefore the mouth is clammy and there is a yellowish or yellowish-white coating on the tongue. This first indicates a bilious condition; the bile diffuses itself through the mucous membrane like a drop of oil; it is therefore necessary to clear and clean this internal membrane. Water is not sufficient for the purpose, but the seidlitz salt should be employed to dissolve and carry off the fatty materials of the bile. Almost immediately the mouth becomes cool and the yellowish coating disappears from the tongue.

One easily understands that this early morning clearing out will free one from those gastric disturbances which necessitate purgatives and dieting. What proves that this is the result often of a simple washing-out is that immediately afterwards one can breakfast as well as ever.

The "seidlitz" or Saline Laxative also improves the digestion very greatly, especially, as said in a former paper, if a dose of Pepto-Cardinette immediately follows the meal, which then acts on fresh materials, and the blood is renewed every day thereby. In this manner, as before alluded to, is accomplished the first condition of longevity.

2. On the Blood. This salt acts always with as much certainty on the blood as on the bile or the digestive tubes. The seidlitz salt increases the ruddiness and fluidity of the blood by

Have you used quinine arsenate up to one or two grains a day, after thoroughly and completely unloading the liver, in malarial fevers. We have had great success with it. —Ed.

Acne disappears when ergotin enough is given to contract the dilated capillaries, leaving the skin smooth. Berberine gr. 1-6 three times a day and upwards accomplishes this end still better.

causing its decarbonization, at the same time the albuminous materials are kept in solution, preventing stoppage in the circulation and thereby often consequent sudden death from apoplexy.

Cases are not rare where deaths have taken place from causes of this kind and where no apparent organic lesion was present. Little clots of blood or emboli are carried along in the blood-vessels, rounding themselves in the course like the pebbles of the sea, blocking, as every physician knows, and so producing sudden death. If this debris is voluminous, says Virchow, the principal trunks of the pulmonary artery are obliterated and there is instant asphyxia. Other very minute particles of the embolus may penetrate the finest arteries and cause limited inflammation, miliary or otherwise, in the parenchyma. The daily use of the Saline Laxative is of great importance in order to ward off pulmonary apoplexies.

A full exposition of these questions is not necessary here, but all will understand their importance. Persons who are tormented by glairy discharges are deficient in the saline elements of the blood. Under this head chemical analysis and experiment demonstrate great differences between individuals according to their temperament. This was amply shown in my articles, "Physiologic and Therapeutic Notes and Experiences," in Vol XV. of the *Medical Summary*, March, 1893, to February, 1894, inclusive.

A blood rich in salts is less watery, is denser and less subject to infiltrations. Salt aids in the renewal of the blood; it is its presence which gives vigor to

youth. We can compare those in whom the blood is not renewed to those who live constantly in the same or a foul atmosphere; they feel around them a want and grow old before their time.

The saline or seidlitz prevents obesity and fatty degenerations of our organs, principally of the muscles of the heart. It is well known that persons afflicted with that disease already progressed to shortness of breath, soon get rid of their infirmity or have it considerably relieved, by using a few of the dosimetric granules of strychnine arsenate every day, and clearing the intestinal tract by taking every morning a full dose of the saline laxative or seidlitz salt. A celebrated physician and physiologist (Barthez) called the blood a fluid flesh, meaning that good blood and sound muscles are synonymous. Now it is not a matter of indifference to have firm or flabby muscles. The action of the salt on the muscular system consists principally in rendering the contraction of the muscles more energetic and thus liberating more heat and electricity. Now, "heat and electricity are the two physical factors of life."

For many years I have made daily use of the Abbott Saline Laxative or seidlitz salt (a chemical composition of pure sulphate of magnesia, sugar and effervescent, and to that circumstance I owe the youthfulness I continue to enjoy, notwithstanding age and an extremely anxious life, part of which was spent in the military service of the United States where all was toil, trouble and turmoil, consistent with a medical life of that kind, which no one knows better than the ones who have endured it. I



In all Neuralgic paroxysms, remove the blood from the nervous centers by atropine and aconitine, a granule each every 15 minutes, but do not forget how many of these are autotoxemic.

I want to renew my subscription for the CLINIC. I would not be without it. It is the best and most practical journal I ever read.—M. R. McCrory, M. D., San Marcial, New Mexico.

allude to the cruel war of our late rebellion.

I fail of time and space here to speak fully of the value of salt on the brain and nerves; and the diseases, rheumatism, gout and gravel, all of which complaints are related, and are due to atony of the digestive organs, the skin and kidneys, and a cold damp atmosphere.

The treatment as indicated I merely mention here, that is, hot alkaline baths (a solution of carbonate of soda), douches and packs of the same (sometimes even cold answers better as an application), and especially the daily internal use of the saline or seidlitz salt (not the seidlitz of the blue and white paper commonly known as the seidlitz powder of the shops, but the seidlitz salt of the dosimetric pharmacy, which by its mild alkalinity corrects the acidity of the blood and humors), and the granules of lithia benzoate (a dozen a day) to change the uric and other acids of the blood fluids; a rational and physiologic treatment, while most others are dangerous and non-physiologic.

The gouty are always ill for a few weeks before they have an attack. They are never in better health than when just recovering from an attack. However it is a painful affection which if allowed to continue long causes great infirmity. It must not therefore be prevented from coming out but, as Prof. Burggræve says, shown softly to the door by the proper dosimetric remedies, the principal and safest of which we have just mentioned. Benzoate of soda and lithium, strychnine arsenate and digitalin, may be given in a combination, three or four granules of each a day, when the gout does not come at its epoch and the

patient experiences pains in the region of the heart and stomach. This treatment can be carried out at home or anywhere else. Keep the body free by the seidlitz salt.

Philadelphia, Pa.

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Years of personal and professional experience demonstrate that Dr. Buckley is right. You have but to follow his suggestion to demonstrate it for yourselves.—Ed.

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ECLAMPSIA.

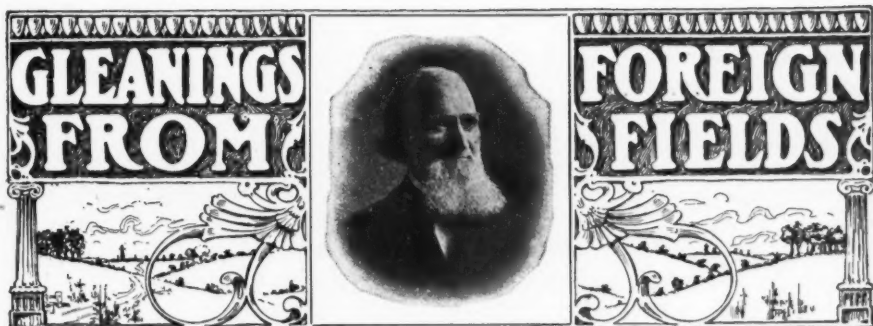
Norris (*Ther. Gaz.*) gives the indications for veratrum as a full, quick, high-tension pulse, consciousness returning between convulsions, where the toxins have not overwhelmed the patient. Contraindications are a feeble rapid pulse, the patient profoundly toxic and irresponsive to treatment. Heart-stimulation is then needed, with rapid elimination by saline purges and elaterium, and refilling the drained tissues with salt solution. Veratrum replaces or succeeds bleeding. Use small doses at frequent intervals (fifteen minutes). Keep the pulse between 70 and 80.

Good sound sense every word of it. He administers veratrum for the condition, not for the disease; and he has caught the true spirit of dosage for effect. Pity he has not learned to substitute the more prompt, certain and uniform veratrine, for this is eminently a case where these qualities are conspicuously desirable.

Davis adds to the reasons for using veratrum that it promotes dilatation of the cervix.

In Gastro-intestinal Catarrhs give juglandin, a granule every two hours, to stimulate healthy secretions and replace the morbid products.

For Insomnia with disturbed equilibrium of the circulation, give three Dosimetric Triad granules on going to bed. Try it also if you have "caught cold." It's a sure abortive.



By E. M. Epstein, M. D.

CANCER SUCCESSFULLY TREATED.

The following case is reported by Prof. Dr. Kugel of Bucharest, and the same reasons which induced him to make this report induce me to translate it for the readers of the CLINIC.

A lady, 52, a relative of Prof. K.'s noticed in 1892, a nodule the size of a bean in her left mammary gland, which nodule was extirpated. During the next five and a half years the lady was operated upon three times for the formation of new nodules in the following sequence: Two and a half years after the first operation a nodule formed in the cicatrix, which was removed together with a great part of the gland, and the left arm-pit too, in which some nodules were to be felt, was cleared out at the same time. Six months after this, nodules were formed above the cicatrix, and they were removed. Two and a half years after this a nodule formed below the cicatrix which nodule was duly extirpated and at the same time the remaining part of the gland also removed. The extirpated parts were repeatedly examined by Prof. Babesch of Bucharest and by Docent Dr. Albert of Vienna, and cancer cells were found there

imbedded in relatively much adenoid tissue.

In September of last year, two and a half years after the last operation, an immovable nodule, the size of a pea, was noticed on the neck in the left supra-clavicular region, about the middle of the upper edge of the clavicle. Simultaneous with the appearance of this nodule there was pain in the left arm and œdema of the hand. Most of the surgeons that were consulted in Bucharest and Vienna disadvised from further operative interference. In the next six weeks the nodule increased to the size of a hazel-nut, the œdema of the hand and the pain in the arm becoming very considerable.

It was in the beginning of November of last year that under the above circumstances I turned to Prof. Adamkiewicz in Vienna with the request that he should use his method, which consists as is well known of injections with his serum called Cancroin, on my patient. He kindly began his treatment, which continued till now through almost seven and a half months. Daily half a gram of Cancroin was injected and a pause

made of six to eight days after every twenty injections. The patient bore the treatment pretty well and but once there occurred a rather strong attack of vertigo, on account of which a pause of fourteen days was made. Of the effects of these injections I have to say the following:

1. The nodule on the neck became small in size during the seven and a half months that the Cancroin was used, a fact which was verified by other colleagues who observed the case. This is remarkable in every respect, especially in view of the statement above made, that within six weeks the nodule increased from the size of a pea to that of a hazel-nut.

2. The pain in the arm and the œdema in the hand became less after the first ten injections, disappeared entirely after the first twenty injections and have not recurred till now after seven months. This too is remarkable when it is remembered that these symptoms increased with the increase of the nodule till they reached a high degree.

3. The appearance of the patient which previous to the use of the injections had become noticeably worse during three to four months, remained at least the same and has even improved a little.

These phenomena are so striking that I consider a further hesitation to publish them as unjustifiable. I will be glad if this report will induce more medical men to interest themselves in this treatment and thorough trials be made with this remedy.

[The translator has only to add for the benefit of those who may not know it that the monthly from which the above is translated is one of the most reliable

ones in the world, and that its chief editor Dr. Oscar Liebreich would certainly not have admitted the report in his journal if it was not worthy of our confidence.]

THE CURE OF INEBRIATES.

The following are from Dr. E. Flade's book on the civil regulations of institutions for the cure of inebriates, and their management in Saxony.

People get accustomed to alcohol from social compulsion or from entertaining the erroneous notion that it is nutritious, that is, that it increases bodily heat, or from drinking to drown their sorrows, or from hereditary impulse. Inebriety is to be regarded as a disease, when a person cannot leave off drinking without discomfort. The first nervous disturbances produced by alcohol show themselves in the psychic sphere; the drinker becomes irritable, is ready to quarrel and fights on the least provocation, or he becomes stupid and indifferent to his duty and profession. His memory suffers and there is a lack of deliberation, hence his impulses become unbridled. After short regrets he lets his good resolutions fall. Further disturbances are, transient deliriums, alcoholic epilepsy, alcoholic pseudo-paralysis and dementia. Where the latter has developed itself, or where the drink-disease manifests itself as a part phenomenon of moral blindness, there is no hope of a cure. The other forms of disease mentioned pass off spontaneously, or can be cured.

The institutions for inebriates must be those of confinement. First of all the alcohol must be totally withdrawn; no delirium or other ill consequences were

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In Lumbago, Pleurodynia, chest-pain when corsets are removed and Rheumatic Sciatica, three or four granules of colchicine daily are quite effective.

In Malarial Fevers, break up the chill with a full dose of atropine or pilocarpine, unload the liver, and follow with quinine arsenate, a granule every hour while awake.

observed from this withdrawal. Nurses and physicians of such institutions must be abstainers. The manager of the institution should be a psychiatrist. State control over such institutions is self-understood, since they have to restrain individual freedom. In the dieting it is to be considered that since such individuals are accustomed to much fluids, therefore that quantity should be supplied, with non-alcoholic drinks.

Regular manual labor such as agriculture, horticulture, carving, cabinet-making or any other manual skill belongs to the main factors of the cure, and these exercises should be compulsory. At the same time there must be opportunity for diversion and amusement, such as bowling, English [American] games and music.

The institution should be small and calculated for not more than fifty inmates. The cultured ones should be kept separate from the uncultured, and women from men, and for every category of people there should be a separate institution. For wealthy inebriates there will be private establishments, but for the indigent there should be benevolent associations, or the state should take care of them.

When the cured one returns to active life his connection with the institution should be kept up; he should visit it occasionally and he should be visited, and from the ranks of the cured ones a society of abstainers should be formed. Such associations will be preventives against relapses, for mutual encouragement has proved itself to be specially effective. Statistics show that 50 per cent of the inmates of inebriate institutions remained permanently cured.—

I take the CLINIC and could not practise medicine without it. It is up-to-date in every respect.—Dr. R. E. S. Smothers, Moores Bridge, Alabama.

Erben, *Wien. Med. Wochensch.*, No. 34 1901.

TOLSTOI'S LATE SICKNESS.

M. V. Tchertkof gave the *Echo* of London an interesting detailed account of Tolstoi's recent sickness.

Being affected for some time with rheumatism he took salt baths, and was advised to remain indoors. But on the tenth of July, despite this advice he went on horseback to a little village about three miles distant from Yasnaya Polyana. It rained hard and it must be that Count Leo Tolstoi took a cold. He felt ill during the subsequent night, and had a high fever. He rose, however, in the morning, dictated a number of letters, and sat down on the veranda of his house. He himself wrote a letter to M. Tchertkof for a book in which that gentleman had explained Tolstoi's ideas about the sex question, in which letter the Count vigorously condemned Malthusianism. On the twelfth of July although feeling quite feeble he took a walk in his garden, but found himself so weak that he was obliged to sit down on the ground over which his daughter spread out a garment. His pulse beat 150 per minute and the cardiac disturbance became alarming. Nevertheless he dictated during the moments of respite corrections in his article, "The Best Remedy," which he addressed to the working people of Russia. When asked how he felt himself, he would answer, as he always did, when he was very sick: "As it ought to be."

On the fourteenth his condition became worse and his family was sent for by telegraph. The physicians had lost

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I use alkaloidal medication altogether, with astounding and beautiful results, and wish you many long years of deserved prosperity.—H. D. Guidry, M. D., Scott, Penn.

all hope and believed that the rheumatism gained upon the heart, a condition which in a person of his age proves generally fatal. In spite of coffee and caffeine he became so weak that he was unable to adjust the coverlet on himself. "The carriage is at the door," he said to his daughter, signifying his willingness to quit this world. The night of the fifteenth was a terrible one; sharp pains in the stomach, chest, and all over the body exhausted him almost completely. On the sixteenth although excessively tired out he showed a strange calmness. "I am," he said, "on the crossing of roads, and I am ready to take either road." At last in the evening he felt himself better and dictated a telegram to a friend, saying: "Notable amelioration. Hope of recovery." He also spoke about a letter from a Hindoo who interested him very much.—(*Gazet. Med. de Paris*, Aug. 17, 1900.)

ARCHAEOLOGY.

Sic transit gloria mundi; fate of a royal mummy.

The distinguished French Egyptologist Morgan related the following anecdote: He discovered in his Egyptian excavation the mummy of a Rameses. Coming with this precious package to the railroad station, he refused to commit it to the baggage car and insisted on having it with him in the passenger car, and had to buy an extra ticket for his dead royal majesty. Think of a Rameses of 3,000 years ago riding in a simple passenger coupe to his residence in Cairo!

But even this was not enough humiliation for the earthly casket of royalty,

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The CLINIC has grown in favor until it has become my favorite journal. Cannot afford to be without it.—Dr. L. L. Janeway, Whitwell, Tenn.

and more than that awaited him at the Custom House there. "What have you got there?" asked the collector, pointing to the sarcophagus. "A mummy," replied M. M. "It cannot pass without duty," said the collector. "The mummies have nothing to pay at the custom house," protested M. M. "We will look it up in the tariff lists," said the collector, and the whole body of employes went to work searching through the enormous folios, but found no entry for the article "mummy." It was a new experience to the administration. "Well," said the official, "enter it as a salted fish, and pay for it three piasters." And Rameses made his solemn formal entry in Cairo as "A Salted Fish."

VACCINE IMMUNIZATION.

Martius (*Arbeiten a. d. k. ges. Amte*, 17, page 156), says: Vaccination immunizes usually for about ten years against the disease, and longer still against death from variola. M. tested experimentally as to whether, and to what degree the animal lymph is modified by the serum of the vaccinated animal, or human being. In the serum of brutes and men there are, twelve days after vaccination, certain stuffs which render the vaccination inoperative, i. e., they hinder the formation of pustules. The quantity of these stuffs (we beg leave to notice, that the word "stuff," which is here rendered for the German "Stoff" is too good a word for scientific use to be relinquished to its slang use; which among the eight definitions in Webster is only the sixth, while the five preceding and two succeeding definitions relate to serious matters of fact, and are

For Fainting and all sudden attacks of Heart-weakness, give glonoin for speedy effect and one of the heart-tonics every 1 or 2 hours to prolong the action.

quoted in use from such respectable English as that of the common version of the Bible, Shakespeare, Franklin, F. G. See, Hayward, Dryden, and Knight) is perceptibly diminished in the calf three months after vaccination. In human beings who were vaccinated twenty years before, these stuffs could not be demonstrated at all. There circulate, therefore, after vaccination and also after variola, certain vaccinocidal immunizing stuffs in the blood, but the actual duration of vaccine immunization cannot be ascertained by these experiments.—(Ibid.)

KOCH'S DICTUM.

Koch reasoned from these facts: (1.) That bovine tuberculosis differs from human tuberculosis, and (2) that the transfer of the latter to the former never takes place, that therefore the transfer of the bovine tuberculosis to the human being does also not take place. To test this dictum a scientific commission was appointed with Virchow, the most noted pathologic anatomist of our times, at its head.

In the session of the Berlin Medical Society of July 24, 1901, Virchow made the statement that the latest experiments instituted in Berlin proved that the "products of human tuberculosis" produced no phenomena in the animals experimented upon, which phenomena could at all be compared with those of bovine tuberculosis. The opposite inference, that bovine tuberculosis is not transferable to man fails as a matter of course.

Koch seems to have gone too far when he excluded the possibility of that trans-

fer by the way of food. Virchow has preparations of peritoneal tuberculosis, which are very suspicious in this respect, and which speak against Koch. On the other hand it is perfectly true, that human and bovine tuberculosis are not identical. Virchow stated this fact already in the year 1863, and he was treated then by the Koch school "with a certain sort of contempt," on that account. To-day Koch himself preaches Virchow's doctrine. Virchow now defines again precisely what the conception of tubercle is, viz., that of an organic, grown thing, which originated from the tissues of the body itself although it came about by the irritation of tubercle bacilli. He emphasizes again now as he has repeatedly done before, that there is a difference between the real pathologic tubercle and a mere bacteriologic one. In concluding his remarks, Virchow says: "We have to be clear on this point, viz., that there are not only bacillary tubercles and bacillary hepatizations, but also non-bacillary ones, and that not everything in which a bacillus is found is at once to be called a tubercle. On the contrary, we must regard every tubercle as an organic structure, which has grown out of the component parts of the body."—(*Wien. Med. Wochens.*, No. 32, 1901.)

JOHIMBINE.

A. Loewy in the *Berliner Klin. Wochenschr.*, No. 42, 1900, says, that this alkaloid is derived from the bark of the *Johimbebe* tree growing in German Southwestern Africa, where it is used as an aphrodisiac. Loewy injected small quantities of this alkaloid hypodermic-

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In Eructations of gas, give capsicin to tone the stomach and diastase to aid the digestion of starch. Try Grape-Nuts or Malta-Vita and cereal coffee for breakfast.

In Metrorrhagia, give hydrastinine, four granules daily, and during the menstrual week add atropine and rest in bed. Buckley's Uterine Tonic for continued treatment.

ally in rabbits, tom-cats and dogs, and noticed in them a higher liveliness, moderate hyperemia of the head, acute hyperemic swelling of the testicles, the epididymus and the penis. In the dog there were strong erections. Whether there is an increase of spermatozoa is not yet found out. There is no doubt that coital potency can be increased by this means. Loewy has not determined clearly whether these effects, which he observed in men also, come about by direct excitation or reflexively by irritation of the center of erection.—(*Ibid.*)

THINKING, ANCIENT AND MODERN.

Dr. Max Neuburger of the Vienna University, in his historical brochure, *Die Anschauungen ueber den Menchaniamus d. Specifischen Ernaehrung*, pages 22, 23 has the following fine sentences: "We believe to have shown in the preceding pages that the grand individualities of antiquity have understood how to grasp the pivotal point of the problem of specific nutrition, and to analyze the gist of the question into its elements. With their spirits' fullness of ideas soaring far and wide and deep, they reached in logical development and gradually to that dilemma for which only modern biology could find a solution from experience. And the dilemma is this: Are the component parts of the body nourished passively only, or are they furnished with a certain autonomy to nourish themselves by virtue of a peculiar selective attraction? But, and this must be specially emphasized, they held at the same time that this faculty of selecting was bound to laws which appertain gen-

erally to matter as attraction of kindred things. At the low level at which the knowledge of physics stood then, at the total absence of chemical knowledge and technical helping means, there stood not even one single observation at their command with that convincing force which is the privilege of modern science to have from experimental facts.

The place of knowledge was occupied in them by a spiritfult presentment, and the bee-like industry of the investigator is represented there by the imagination of the thinker. Dominating ceaselessly however in antiquity, even on the smallest section of our problem, was that constant ebb and flow, that going and coming of opinions, in short that liability which indicates life everywhere, and so too the life of the spirit.

LEPROSY AND THE MOSQUITO.

Marcel Baudouin, editor of *Gazette Medicale de Paris*, in the issue of Aug. 17, 1901, suggests from observations which he made on the foci of leprosy in France, where certain regions near these foci are immune from this malady, and from the presence or absence of marshes about them, that the mosquito may perhaps be the carrier of leprosy infection. [As we are becoming acquainted, unhappily more and more with this loathsome plague in our country, every hint about its cause and prevention should be given to and gratefully received by the patient scientific toilers in the sacred cause of our healing profession, though the fanatic and sectarian interlopers and their dupes among us revile us. We shall bless even though they curse us.]

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The premium-case reached me all right today and I am well pleased with it, and still more pleased with the CLINIC. I am just beginning with the alkaloids but am doing nicely.—John F. McCarty, M. D., Big Creek, Ky.

In all cases of Gleet, when calcium sulphide does not promptly cure it is because the dose has been too small. Give two grains every waking hour if necessary. If it fails add to each dose one granule of arsenic sulphide.

Miscellaneous Articles

THE DOCTORS' MINE: THE BURNS-MOORE.

DEAR DR. ABBOTT: Since my return from a visit of inspection to the Burns-Moore Mining and Tunnel Company, I have received quite a number of inquiries as to what I thought of the properties originally belonging to, and those more recently acquired by the company; and with your permission I will reply through the columns of "THE ALKALOIDAL CLINIC," so that my friends who are interested in the company, and readers of your valuable journal, may learn what I and those who went with me think of the company's properties.

I will state that several of my friends and self (some being stockholders) left St. Louis, August 8, and reached Idaho Springs on the 12th. We remained four days, and during that time Dr. J. M. Shaller went with us all over the properties. The pay veins are many, and are from one to four feet wide on the surface, with a history that they



J. A. KING.

widen and gain in richness as depth is gained. Assays that have been made are all favorable, and I firmly believe that with our power plant running we will be receiving dividends in the near future. We simply *must* make it go, and as every one interested that I have met is determined upon this particular point, I do not see where failure is possible. With the veins that I have seen on the surface, I feel that we will soon have one of the best paying properties in the state. Thorough development will surely do it.

Since I have examined the property I must say that to the best of my judgment it offers a first-class investment. Dr. Shaller is giving all his time and best energies to the work, and he is the right man in the right place, and is looking to the interest of all of us. I do not hesitate a moment to recommend the Burns-Moore. We have valuable ground, and there is no doubt whatever

about the honesty and good intentions of the management. I do believe that a property showing up as well as ours, will, when thoroughly developed, prove a large dividend paying property.

Dr. Shaller stated that during the month of September our power plant would be in operation; and this means very rapid development. We have one of the finest water powers in the state, thereby saving the cost of fuel.

In closing I will say that we were all so well satisfied that we have increased our holdings, and quite a number of our friends have since taken stock.

J. A. KING, M. D.

St. Louis, Mo.

—:O:—

My last visit to the Burns-Moore followed that of Dr. King and his friends very closely. I regret not to have met them, but hope to at another time. We expect that many of our friends will wend their way to Idaho Springs during their vacation days, and while seeing for themselves the work going on in the "Doctor's Mine," enjoy the life-giving climate of this wonderful state of Colorado. I heartily endorse all that Dr. King says. The investment, in my opinion, is a good one.—Ed.

SMALLPOX.

From the report of the Chicago Board of Health on the recent epidemic of smallpox we take the following:

The vaccinal status of these 310 cases was as follows: Five had typical old scars. The most recently vaccinated was sixteen years previous to the attack. The date of vaccination of the others ranged from twenty to fifty years previous to the attack. Nine had fair old

scars, twenty-five had old, imperfect, doubtful scars. Two hundred and seventy-one never had been successfully vaccinated.

An absolute diagnosis of smallpox can not be made before the eruptive stage, except in the hemorrhagic form. In all these mild cases there was a general conformity to the history and course of the typical case of smallpox. There was always the prodromal symptom with the subsidence of fever when the eruption appeared. But we have to remember that chicken-pox is sometimes preceded by prodromal symptoms and that chicken-pox attacks adults and that the prodromal symptoms in smallpox are sometimes irregular and slight, so that we are compelled in some cases to make the diagnosis on the character of the eruption alone, as presented to the eye. The diagnosis can be made, for there is a difference in the appearance to the eye and the clinical course of the development of the skin lesion. The smallpox lesion has a deeper origin than chicken-pox. The papule rests on the *cutis vera* and by inflammatory extension this tissue is implicated. Not all of the lesions are so deep-seated, but I was always able to find some of the vesicles with thick, tenacious investment which keeps the vesicle and pustule intact longer than is the case in chicken-pox. Chicken-pox lesions have only the outer layer of the skin for a covering. This covering is fragile, easily broken, and is broken from the first to the third day of its growth. The vesicles or pustules of chicken-pox, no matter how robust, will not resist accidental violence or natural decay more than four days, except on the hands and wrists of an adult negro, where the covering of the pustule is so thick as to re-

THE ALKALOIDAL CLINIC is my favorite medical journal. Dr. A. E. Wanamaker, Hamburg, Ia.

Aspidospermine only fails when given too gingerly. Give two granules every five minutes for dyspnea.

semble or merge into the life history of smallpox lesions. The external layer of skin in an adult negro is thick, and the eruption of varicella here looks and feels like the papule of variola, but an examination of the lesion on other parts of the body will aid in determining the nature of the disease. Measles is a popular disease, and the first day of the eruption is often mistaken for variola. Such a mistake should not be made. In measles the fever is highest on the day of the eruption, while in smallpox this is a time when the temperature usually drops to the normal.

In making a diagnosis of variola, remember there are some prodromal symptoms in the mildest cases, if you are successful in getting the truth out of the patient; that when the eruption appears the patient will always feel better, unless there is present some intercurrent disease, and that the fever will subside as the eruption appears. Look for the early appearance of the eruption on the vascular parts, on the face, in the throat, on the wrists and hands, on the fore-skin and glans penis. If you find a papule on the ears it will help in the diagnosis. Do not depend too much on finding umbilication of the vesicles; you will be disappointed in the mild cases, as it is often absent.

Of the 310 cases treated in the Chicago Isolation Hospital, but six died. It is this low death-rate in this epidemic that has led the laity and the inexperienced physician to doubt the diagnosis. To convince the inexperienced, the typical case must be constantly in evidence.

Why there should be so few serious or fatal cases in this outbreak I do not know, and I am equally ignorant as to why the epidemic of scarlet fever prev-

alent at the same time in Chicago has been so mild. Our knowledge does not reach far enough to say why one epidemic is severe and another mild in any of the epidemic diseases. These mild forms of smallpox are always present in all epidemics of this disease and have been recognized and written about from the time of Rhazes down to the present. In Chicago and elsewhere I have had no difficulty in making a diagnosis of smallpox. Occasionally chicken-pox was encountered, but I never met any disease not well described. The occasional occurrence of chicken-pox in adults always has been a source of confusion to medical men who are not in constant touch with variola and varicella and have not become perfectly familiar with the clinical aspects of the two diseases in all their forms. An unrecognized case of chicken-pox in an adult may account for some of the reported successful vaccinations in a subject recovering from smallpox. Dr. Rawlings, of the Isolation Hospital, vaccinated more than 100 who had recovered from the mildest form of this debatable disease, and in no instance did he get a successful result, though they had never been previously vaccinated.

In Chicago we placed all patients with smallpox—hemorrhagic, confluent, and cases so mild that they would be at work if not prevented—in the same wards in the hospital. Of these, 271 never were vaccinated. None of these afflicted with the mild form of the disease contracted smallpox from the severe typical cases, of which variety we always had a few in the wards, making exposure prolonged and certain. If these mild cases in unvaccinated subjects had not been smallpox, with this prolonged exposure numer-

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The "Treatment of the Sick" is worth almost as much to me as all the rest of my library.—L. A. Marty, M. D., Jamestown, Kan.

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For the Itching of Jaundice give pilocarpine enough to cause slight sweating. In how many other forms of itching is it effective?

ous cases of smallpox would have resulted. Another fact to be remembered is that these irregular mild cases have conveyed typical confluent smallpox to other members of the family. One of the wandering variety, singing in concerts in various towns, had her case diagnosed as chicken-pox by several physicians in two States, yet she conveyed the disease to four members of her family, one of whom died of confluent smallpox in its most hideous form. This mild form of the disease gives immunity from smallpox and will transmit typical, confluent or hemorrhagic smallpox. Of this we have had abundant proof in Chicago. Further, the disease follows the rule of smallpox in attacking exclusively those not protected by vaccination.

QUALITY OR COST.

I send to you to-day for a new supply of "Rifle Shot," I can't do business without them. They are good. Now, there is one point I want you to settle for me. It is this: Will you always make the granules as good? Don't ever lower the standard, but raise it and raise the price if you must, but never, never, never, reduce the standard of excellence of our medicines. I would rather pay double the price than use an inferior drug.

I was scared when you cut the price of nuclein, but I had the night-mare, for nuclein is still O. K.

That is right! Lower the price when you can and live, but never at the expense of quality. We would rather pay.

C. E. JONES, M. D.

Winslow, Ark.

—:O:—

Thanks for your real nice letter, which did me good to read. No, Doctor, as long as we are above ground and in pos-

One of the most prompt and powerful means of inducing iodism is arsenic iodide. It may well replace the bulky iodides.

session of our faculties, there will be no alteration in the quality of our granules.

We have steadily resisted all the pressure brought upon us to cheapen our goods. We know what it costs to make and market good goods, and anybody else who wants to sell below this point may do so; and if our friends feel they must buy from the lowest priced people, why God bless them, that's all. But we will not alter quality except by improving it, and whenever the strength of any of our preparations is increased every user will have due warning.—Ed.

HOMES FOR OLD DOCTORS.

I was interested in your editorial about a home for aged physicians. The government has furnished homes for old veterans; in some of the states the Masons, Odd Fellows and other societies have homes for their old members. Shall it be said that the noblest and most benevolent of all professions has not any?

Brothers, let us be up and doing. The old doctors are getting pushed to the wall. Let us have Dr. Abbott to organize one; he has the executive ability to make it a success. Besides it would be a labor of love and honor to the profession.

And don't forget the old doctor's life companion. It would be more like home. I think the plan a good one for each member to pay so much annually, until a certain amount is paid, to entitle him to membership. Select a healthy mountain home, with a valley to raise fruit, flowers, etc. And why would not a model sanitarium bring in a revenue to support the home (located on the grounds)? Let us hear from other members of the CLINIC family.

C. H. MOORE, M. D.

New Bremen, O.

I am highly pleased with the results from your Tape-worm remedy, for it did the work.
—James J. Toalson, M. D., Alta, Ill.

IMPONDERABLE THERAPY.

I thought I read the CLINIC pretty thoroughly, but to-day, in huffing over the files for some light on a point, which I seldom do without getting what I look for, I noticed the query of J. B., Oklahoma.

Phrenology I know little of, but the other three things I have had some experience with. *En passant* I will remark that a good psychometrist will take a letter and from it give a character-reading that puts the phrenologist out of sight. I don't mean this as a slur on phrenology for this science has done a great work in the past.

Palmistry is quite a fad of our day and no one can afford to sneer at it. A somewhat intimate acquaintance with "Cheiro," and closer intimacy with some other excellent palmists, has convinced me that there is a mighty meaning in this science. Not that I have ever found it an aid in diagnosis, such as I for myself have proved astrology to be, but one can get a pretty clear insight into a person's character by this means, which is no mean knowledge. For when a subject comes to me for treatment, it is something to be able to form a definite opinion of his truthfulness; as a man will lie—even to his doctor—unless the doctor gives him conclusive proof that he knows the truth. Ananias died some centuries ago, but "his soul is marching on" in his descendants.

And before I have anything to say about chromopathy, which I take to mean color treatment, I wish to premise that I do not ask, hardly expect, any one to believe what I say. I do not care whether any one does or not, that is, so far as my own personal self is concerned. Men sometimes have very pronounced opinions regarding things of which they have no right to an opinion. For unless a man has some knowledge, experimental knowledge, of a thing, he has no business with an opinion regarding it, save that which he wisely, if he does it, locks up in his own mind because it is worthless outside. All I want to do is to provoke thought, whether its stimulation results in "writing me down as an ass," or not. You don't expect a man to believe what you say about Alkalometry, when he will not even listen to you.

I think I have written enough on Astrology, at least enough to suggest its value as an aid in diagnosis. There is much more beyond, that might lead me to think that planetary forces and influences might be used in treating disease if one knew just how to handle them. But it is yet a long way off. We have not yet found out regarding planetary and astral action on the remedies we use, and to my thinking this must come first. "First that which is natural; then that which is spiritual."

For Pruritus of anus or vulva give aluin, seven granules daily. This is suggested by Dr. Phelps. Let others suggest.

The combination "Heart-Tonic" is an admirable combination, by which the heart's force is increased and arterial tension relaxed.

A few years ago there passed away in St. Louis a strange character, old Dr. Hotchkiss. He was said to have reached the age of 143 years. I had no personal acquaintance with him but I was intimately acquainted with a man who spent months with him, studying his methods. Like some of the old mystics of the middle ages he seemed to hide himself in a cloud of absurd antics and eccentricities. He never revealed the secret of his power, even to his closest associates, always leaving them to find out what they were smart enough to see and to go without the rest.

The old man had his room hung with rags of every conceivable color except blue, to which he had the antipathy that the devil is said to have to holy water. A friend of mine called on him one day wearing a blue necktie, and the old man drove him from the office in a rage. What gave him this feeling does not matter.

These colored rags he would give to a patient with the instruction to wear them according to directions, and I have been assured by some who knew him that he never failed. No doubt some of your St. Louis readers will recall him to mind.

Well, what is the philosophy of this color business? Is it not the action of the law of vibration that people are talking so much about? Those who have not experimented with this law in an investigating way, can have no idea of its power. Take Van der Nailen's book "On the Height of Himmelay," and strip it of its sensational verbiage, and there is a tremendous revelation in it.

It is said that if one could be placed in an absolutely dark room, from which every sound could be completely shut

out, and a reed made to vibrate, this phenomenon would be produced: When the vibration reached sixteen per second, the lowest sound perceptible to the human ear would be produced. Increase the vibrations and all the gradations of pitch would succeed, each doubling of the number of vibrations giving an octave higher, until the pitch became so acute that the ear could no longer distinguish it and silence would ensue. Now continue these vibrations until they reach trillions and a light would appear, and with the increasing vibrations would go through all the colors from yellow to violet, when the manifestations would cease.

What lies beyond this, which has any effect on the human organism? I have never seen any theory, but is it through sense of odor? Swedenborg says that the succession is: Hearing equals Obedience; Sight equals Knowledge; smell equals Perception; and perhaps this sequence will some day be "proved" as to the law of vibration. This illustration of vibration passing from sound to light and beyond is given in a different form in Chapter XXXII of that deeply interesting book "Etidorhpa," by John Uri Lloyd. (And I wonder how much that man could or could not tell if he did not keep his mouth so closely, wisely perhaps, shut on some of these topics.) I am almost moved to ask his pardon for bringing his name in here, but I expect that there will be some flings, mental if nothing more, at these thoughts, and at those who think outside of conventional limits, and I want to give the archers a shining mark.

Dr. Cutter had a fine article on Music and Medicine in the July CLINIC, and he makes some strong suggestions.

Scarcely any of the thousands who used Apocynin on Shaller's word failed to find in it a powerful remedy for dropsy.

I have had good results from the use of Vaginal Antiseptic in cases so far treated.—Dr. F. M. Jeffers, Lafayette, Ind.

I didn't know that he was still on this earth until I read his article. Nearly forty years ago I was an organist for a church in a suburban town, and the doctor was the tenor singer in the choir. I well remember how exquisitely he used to sing the opening solo in the "Messiah," "Comfort Ye My People," and when I was reading his article I thought if he would sing that solo in a sick-room with William Horatio Clark at the organ, he would drive death back.

The same law that Dr. Cutter recognizes in regard to musical vibration may continue on into the realms of color, and it may be that the color of one's bandage may affect favorably or unfavorably one's patient. And if one medicates a bandage for a patient to wear for lumbago, for instance, whether it be charged with powdered herb or pulverized alkaloidal pellet, or thought (if one believes that a thought is a thing), the color of the bandage may be a potent factor. Take this idea, J. B., and think it out. You may find something in it, and "when found make a note of." And when you get hold of a nervous case that seems to bother you, try filling several clear flasks with water of various colors, and set your patient gazing at one for fifteen minutes. Try one after another until you find the one that is most restful and soothing, and see what a grand auxiliary you have for your atropine, scutellarin, cypripedin, or whatever remedy you use. A knowledge of occult astrology will give you this knowledge of the proper color without testing.

I don't pretend this sort of thing will work perfectly in every case. Much depends on the patient, more on the doctor.

Waugh states that atropine, 1-500 grain every half hour till the secretion is checked, is the best palliative for Hay Fever and has no danger back of it like cocaine.—*Denver Med. Times.*

But I am going to tell one experience, Doctor, that even you may laugh at.

I have been trying podophyllin and every known thing in a case of torpid liver. I didn't use calomel for the woman's teeth were shaking out of her head on account of using it. But I took the notion to send for "Hepatic, No. 295." When I opened the package the color, a rich violet, took my eye and I determined to make the color help the tablet. I took six of them to my patient, and handed her one, telling her to look steadily at it and notice the color, and then swallow it, which she did. Then I told her to take one each night, and to-day she tells me that she feels cleaner and better than for a long time. Hypnotic suggestion, do you say? Perhaps, but I could not have conveyed the suggestion without the color of that tablet, with its vibratory action as a vehicle.

XXX.

—:o:—

Hear all things, reserve belief until satisfactory proof has been adduced, but be chary of pronouncing anything impossible until you are willing to claim that your knowledge is so far-reaching and omni-inclusive that by it you can gauge all the possibilities of truth.—Ed.

SEXUAL PROMPTINGS.

A New England fakir advertised common cajeput oil as the oil of the Sacred Banian tree, costing \$75.00 per ounce, and found many buyers.

Dr. Belcher's so-called book on "Sexual Promptings," besides title-page and preface contains twelve pages, 5¾x3¾ inches, including margins. The fraud appears to be in implying but not stating

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I cannot get along without the CLINIC. I think it improves steadily which is saying a great deal as it has been good since its first number.—W. Charles Carroll, M. D. Kansas City, Mo.

quired. In that way you will soon get so skillful that one visit will answer where three or four are needed under the old system; also because you know what effect you are going to get, whereas it was always doubtful with the galenics. Much obliged for your pleasant words, which we prize.—Ed.

CALCIUM IODIZED IN GOITER.

I have been an interested reader of the CLINIC since I began in the practice of medicine, and have learned many useful things from it. The one which is uppermost in my mind at present is the value of copper arsenite in the summer complaints of children. I have used it a great many times and have yet my first failure to make.

I noticed in the July CLINIC an article on "Sodium Ethylate" in which the doctor recommends it for goiter. Permit me to submit a report on a case of goiter:

Mrs. B., 45, came to me to see what ailed her. She had great difficulty in breathing, her heart was going at the rate of 110 and with such force that I could hear it when several feet from her. She had been troubled this way for four years and was getting worse. The cause of her trouble according to my diagnosis was a large goiter. I quieted the heart temporarily and put her on the following treatment for the goiter: *R.* Calcium iodide (dark), 1 dram; lanolin, 7 drams. Mix. Direct: Apply to goiter twice a day.

R. Lloyd's echafolta, 1 dram; distilled water, to make 1 oz. Mix. Direct: One teaspoonful every four hours.

The goiter began to decrease in size immediately and is now nearly gone.

Has anyone tested the merits of Caulophyllin, a granule every ten minutes in rigidity of the os uteri? Please report.

None of the other symptoms has reappeared.

I have never seen anything in the CLINIC on calcium iodide for this purpose, so submit this report; and I would like to hear through its pages if any one else has tried it. Wishing the CLINIC unbounded success which it deserves.

W. R. TOWNSEND, M. D.

Heartwell, Nebraska.

"THE WORLD DO MOVE."

In your great press of work you may overlook some good things, so I ask your attention to *American Medicine*, Aug. 10, page 209, where an eminent writer speaks of the special value of alkaloids.

Send him a bright new button with a vote of thanks.

When I came to Austin in 1880 I brought a well-stocked case of medicines—mainly alkaloids—and was ridiculed on every side, especially by the "big-old" doctors, who sneeringly called me homeopath, quack or peddler; and would often take up my case as if to feel its weight, make wry faces and grunt, to the contemptible end of the nasty chapter of ignorant asininity.

Now! Who does not have a buggy case! Yes, brother Rastus, "de world do move"—slowly.

Q. C. SMITH, M. D.

Austin, Texas.

CROUP.

I like your way of doing business; one doesn't have to wait so long for his goods.

My boy, 18 months, was seized with sudden hoarseness and fever, could not articulate, breathing labored; in four

The CLINIC talks much like one who has a knowledge of what he is talking about.—J. W. Etheridge, M. D., Reverie, Tenn.

hours gray patches showed on glottis. Gave calcium iodized grain 1-3 every fifteen minutes until vomiting, when he brought up a patch of membrane the size of my thumb nail. Continued iodide for twenty-four hours; result, prompt recovery.

Woman, confined three weeks ago, hurriedly summoned me. She was nearly

gone with post-partum hemorrhage, had lost a gallon of blood. Controlled hemorrhage with atropine and ergot, then gave nuclein ten drops three times a day. Recovery was prompt.

I always get something from the CLINIC to feast upon.

DR. E. J. COOK.

Dangerfield, Tex.

CLINICAL NOTES—SOME GOOD IDEAS.

In regard to a bowel remedy I finally found what I was looking for, in the queries: Tr. of castor. I have no success with lactic acid; probably I don't use it right. Another stump in my road is, how to decrease number of stools and increase their size and consistency, after the sulphocarbolates have disinfected them. 'Tis "easy going" to clear out the smell after the seidlitz salt has emptied, but I always have to use opium or Tannopin; Tannigen to control the quantity.

An exactly similar experience in gonorrhea—Protargol until discharge is bland, then the zinc salts.

I have a case of subacute diarrhea, chronic rather, comes in spells usually after taking cold; but this summer brought on by ice-water (one glass). Sulphocarbolates disinfect and Tannopin cures (?) for the time, but back it comes; watery—tenesmus before, during and after—worse from any solid food and at night. Milk diet exclusively (as far as I know). Turpentine five drops in capsule every four hours—no effect.

Again: Did not the editor recommend creolin douches in rather unusual strength to a querist some time back, and

was he not criticized for it in a later issue? If so, kindly refer me to the article.

In regard to leg-ulcers, I am about to discharge two cured. Treatment: 4 per cent cocaine solution on lint, curette, bandage from toes tightly with gauze, leg on chair or in hammock swing, soak lint with normal saline solution and keep moist all day, bandage dry at night. Improvement the most rapid I have ever seen; foul smell, pus, etc., disappeared together with pain at end of third day. To my notion cleanliness and support of sides of ulcer are all sufficient, if not tubercular or specific.

I am at a loss to know why all alkaloids that are obtainable are not used in preference. Every one who is a real live physician knows they are more accurate, and possess all the virtues of the tincture (with few exceptions, i. e., ergot, etc.). You rarely hear of laudanum from a non-alkaloidist; his cry at the worst is fl. opii deod. and denarcotized, and at best it is codeine and the morphine salts. Now how can a man get *fine* results from a drug that contains two similar active principles, one of which relieves pain and

The premium case reached me all right today and I am well pleased with it, and still more pleased with the CLINIC. I am just beginning with the alkaloids but am doing nicely.—John F. McCarty, M. D., Big Creek, Ky.

In all Hyperemias, equalize the circulation in the beginning by the Dosimetric Triad or the Defervescent, and you will have no inflammations to treat. They give a solar-plexus blow at the start, and the malady is knocked out in the first round.

constipates; the other ditto but does not (morphine and codeine)? When he has tried to answer that, ask him how he gets results at all from jaborandi with two diametrically opposed principles.

To my mind it is lack of education; from lack of opportunity, time or ambition. Nearly all physicians use some alkaloids because forced to do so, and in nearly all cases like them better than crude drugs; then why not use all the alkaloids he can get that are tested? Even let him help to test them.

The trend of modern medicine is towards concentration. I don't have to keep poke-root in a bottle of alcohol, because I can get a tincture ready prepared. I don't care for a tincture because a fluid extract is more concentrated and easier to carry in a case. I don't care for a fluid extract because the active principle is more concentrated still, easier to carry and handle, and above all more accurate.

No wonder the homeopathic proving of jaborandi has "urine dark and scanty"; "profuse" and that its symptomatology is limited to three pages in the elaborated form. *You don't know what jaborandi is going to do.* "Kill or cure" is a good epitaph. Verily! And yet it is a grand remedy—I mean pilocarpine is. It has yielded me positive results in erysipelas, hives, and any skin disease where a diaphoretic, non-constipating remedy is needed. Also in eclampsia, veratrum viride and saline solution hypodermically; you have probably used it; but I've never seen it mentioned, Father Waugh (I am 24), in conjunction with aconitine and veratrine in high fever, dry red skin, etc.; in fact, one half the latter will reduce the fever and pulse to normal after a hypo of pilocarpine has started the

sweat and saliva. I *know* that, for I use it as a routine in typhoid, pneumonia and "all sich pestiferous, sleep-bothering" troubles.

Enough for to-day. Good luck to you. I am going to drop in on you soon and bore you for a little while.

HUGH SCHUSSLER, M. D.

W. Alton, Mo.

—:O:—

Possibly you may check the number of discharges and increase consistency by the use of zinc or silver oxide, with emetin in small frequent doses when tenesmus is present. I do not recollect recommending creolin douches, but believe some contributor did so. I have never used them.

I am now treating the worst case of leg-ulcer which ever came my way. The ulcer was an inch deep and reached from below the ankle to the knee, running entirely around the leg. The ordinary methods were simply out of the question. The man was a carpenter and had to keep at his work. I simply washed it twice a day with a weak solution of iron sulphate, and covered it thickly with pine sawdust to absorb the discharge, which was profuse. In three weeks' time it has more than half cured in extent and is filling up rapidly. I have added to the above the scrapings from a horse in order to induce epithelial grafting. I think your treatment is a good one for reasonable-sized ulcers.

The real reason that many physicians do not use the alkaloids is a conviction that in addition to the alkaloids there is something else in the plant of value, which they would lose by excluding it. This of course is a mere surmise, and the "other thing" in addition to the principal alkaloid is just as likely to be harm-



Has anyone tested the merits of Caulophyllin, a granule every ten minutes in rigidity of the os uteri? Please report.

In Subinvolution, enlarged spleen and other chronic enlargements of glands or tissues, give berberine gr. 1-6 three to ten times daily.

ful as it is beneficial, and of course all certainty or precision is impossible. Nevertheless this feeling is deeply rooted in the physician's mind.

I know you did not write for publication, but your letter contained matter which I deemed of value to our readers; and I may say the same of every letter I have received from you. I will be glad to see you when you come to our city. You have touched the most vital of all the objections to homœopathy; and one to which I have never known one of the followers of Hahnemann offer a decently plausible explanation: Of what possible use can the "proving" of a complex, variable substance like opium, coca or jaborandi be? It is like the oft-quoted analysis a chemist made of an entire mouse.—Ed.

NOTES.

I am convinced of the value of aluina for pruritus, when assisted by burdock ointment.

Where did I get the notion of agaricin for the night-sweats of patients who have a tendency to phthisis? The alkaloidal suggestions call it the best agent to arrest perspiration. It works as certainly in repressing undue perspiration as pilocarpine does in inducing it. I use one milligram.

I want some tablets for people who think granules homeopathic.

I ran foul of a queer sort of a crank last Sunday—a woman who gave up the practice of medicine because she could not cure without drugs. She asked me how I could be a consistent mental scientist and use Abbott's pellets. I set her going and finally she tied herself up. She said that the soul worked

on the body and could heal all diseases without medicine. I asked her if the soul built the body, and she answered, "most assuredly."

"Then why don't you let the soul build your body and stop putting victuals into your stomach?"

Then she called me "obtuse!"

Well, perhaps I am. But I have a question that always staggers these people: There are three accounts on record of healing of blindness by the Master. In one case He spoke the word, in another He touched the man's eyes, in another He made a mud poultice with spittle which he put on the man's eyes.

Query: Why did he need this material aid? He needed it, or he would not have used it.

Your suggestion that pellets might be endowed with faith is an old idea of mine. If you have the *Wisconsin Medical Recorder* of last February, you will find an article of mine in it on the psychic relation of the physician to his remedy, which embodied the same idea. I have no doubt that evil as well as good finds its ultimate in plants as well as in men. The true philosophy is to employ even the evil when we cannot eliminate it. There is not a principle in either the human or the vegetable life that may not be made of use to the man who becomes master of himself. But the wise man is going to put everything that comes into his hands into the best possible condition for use, and that is why I believe in alkaloidal medication.

I notice Dr. Brewer rather laughs at apis mellifica. I have found it of great use in some skin eruptions and urinary disorders. But I don't quite like Dr. Brewer's suggestion of the application. The effect, I know, of his form of ap-

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The CLINIC is a most welcome visitor. Cannot afford to be without its teachings.—Edward Duncan, M. D., Longbranch, Mo.

Diastase is now produced in such a concentrated form that three granules after a meal prevent indigestion of starches.

plication is lasting. I once fooled with a swarm of bees, fifty-four years ago, and one of them got mad and gave it to me straight in the forehead over the organ of perception; ever since then I have perceived the advisability of letting the honey bee severely alone. I would, however, relieve Dr. Brewer of any fear of inoculation with the love virus; for he will remember that honey bees are of the neuter gender, and therefore destitute of this beautiful but oftentimes dangerous faculty. But laugh as one may at the idea, the force that operates in a dog-fight might prove of use if it could be bottled up. I do know of some striking results from the tincture of tarantula Cubensis, and the poisonous lachesis; and our homeopathic friends are now experimenting with the venom of the heloderma horridus, or Gila monster, as a remedy for paralysis agitans. The venom bag of the rattlesnake can be swallowed with impunity (in fact some of our Indian tribes do use it in this way as a preventive of poisoning from the bite of this reptile), while a drop injected into the circulation may cause death—certainly a tremendous upheaval. But I do not know that we can afford to laugh at the Indian's idea so long as we believe in antitoxin or vaccine virus.

If you try the bee sting on Dr. Abbott, let me know how it affects him. I have heard of a bumblebee being placed in the chair of the pedagogue in a country school-house with striking results. You might put one, or a whole colony, in the lunch box of your compositor; it would not give him a much worse "spell" than some of the articles he sets up.

J. R. PHELPS, M. D.

Dorchester, Mass.

In Duodenal Catarrh with jaundice or biliousness, give copper arsenite gr. 1-1000 every hour or two while awake, and use salines against constipation.

I am pained to say that Abbott repudiates the bee suggestion, and we will have to introduce it surreptitiously if at all. I see no reason why we should laugh at Lachesis or at the Indian idea, or at anybody's idea. Few facts are so all pervasively true that they exclude all other things.—Ed.

ETHICS.

I note a query on ethics in the August CLINIC, and your answer; which suited me, and which I have carried out to the very letter since locating here. Consequently I feel encouraged to lay my case before you, as I am one of the youngest members of the CLINIC family, though quite large for my age. I am only seven months in the States, having come from Canada; and part of the feeling against me here is my use of the little pills, and winning success from the older doctors.

In a difficult labor case, I asked for a doctor to give anesthetics while I used the forceps. When the doctor came I had the patient partly anesthetized and everything ready. Instead of getting at the work for which he was called, the doctor took the husband into another room and proceeded to give me a calling down behind closed doors. He then came into the room where I was at work, and said that if the family would dismiss me and call another doctor (a quack), they two would do all they could to save the patient's life. I held the case, and delivered the woman O. K. of a twelve-and-a-half pound boy. A bad laceration occurred, and post-partum hemorrhage. I stopped this in short order and sewed up the laceration on the fifth day. The patient and baby are doing nicely, and

I have no idea of being without the CLINIC which I read with more satisfaction than any journal that comes to my desk.—H. L. Blanton, M. D., Adriance, Va.

The Alkaloidal Clinic

young Dr. Canuck is on top. What would you do to the old fellow? Can he be ousted from the State Association?

G. H. B., M. D.

—, Neb.

—:—

Of course you could make this man trouble in his societies, and sometimes I think it is a duty which one really owes to the profession; but it is one of those duties I have always shirked, preferring to go on my own way, leaving the difficulty between us to my patients, and watching for a chance to do the man such a kindness as to make him thoroughly ashamed of himself to the bottom of his heart. You may hit back and punish him, and you will have an enemy for life; and sooner or later he will have a chance to even up with you.—ED.

POST-PARTUM HEMORRHAGE.

July 6, 1901, Mrs. W., 40, ten children. Baby born 2 a. m., easy labor, full term, placenta expelled naturally in half an hour, no traction or other assistance; in charge of midwife. About half an hour after the afterbirth was expelled, a furious hemorrhage came on. I saw her two hours and a half later. She had had several hemorrhages and fainted after each; found barely perceptible pulse, extremities cold, uterus moderately contracted and seemingly empty and normal in size, no bleeding for a few minutes.

Gave Ergotole m. xx, morphine sulphate gr. 1-4, atropine gr. 1-150, strychnine sulphate gr. 1-50, hypodermically at once, and manipulated uterus until medicine "took hold." Repeated Ergotole and strychnine in twenty minutes. Staid three hours and a half and left her on ergot fld. m, xxx four times a day, morphine

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I can't get along without the CLINIC in my business. It is all nice and to the mark.—A. H. Barton, M. D., Murray, Ky.

as needed to control pain, and strychnine gr. 1-50 four times a day.

Good recovery. In half an hour from the first dose her pulse was 150, fair strength, extremities warm, felt comfortable, no bleeding after I arrived.

Ergotole hypodermically has never failed to give results in my hands, have used it eight or ten years.

G. W. PORTS, M. D.

New Lancaster, Kans.

CALCIUM SULPHIDE.

I had a peculiar and interesting experience with calcium sulphide not long since. A child four years old had been treated for a suppurating ear. I was giving one grain and a half calcium sulphide daily, but the discharge was not disappearing rapidly though lessening somewhat. The mother let the child have the bottle, containing forty granules, grain 1-6 each; and she swallowed the whole lot at once. The child smelt so strongly of sulphuretted hydrogen for the next few days that the family were glad to keep her at a distance. No bad results followed, but the suppuration ceased immediately and has not appeared since.

DR. A. I. BROWN.

Holstein, Ont.

—:—

Do we give enough calcium sulphide in these cases?—ED.

EPILEPSY.

A patient tells me he has taken carbolic acid for epilepsy, with no fit for three years. Previously he had nine to forty daily for fifteen years.

J. C. MOLLINEAUX, M. D.

Woodland, Ill.

The delicate little granule of apomorphine quickly replaces the old-fashioned syrupy cough compounds, when once fully tested.



INTESTINAL ANTISEPTICS.

By R. J. Smith.

Your request to give you and the CLINIC readers my experience in the use of intestinal antiseptics is herewith complied with. Although I feel uncertain as to any great value to others in that experience, I give it for what it is worth; and if you, worthy censor, find it to your purpose, use it; if not, the pleasure is mine.

The sulphocarbolates have been a standby with me for several years, but not always so. Previously salol, betanaphthol bismuth, carbolic acid with iodide, had been used with fair results; but constant objections on the patient's part, and often severe irritation and nausea. Children invariably objected and it was not until the sulphocarbolates were tried that any great success was obtained in treating that very large and important class of patients.

In all diseases of the alimentary tract antiseptics is a *sine qua non* in treatment, and no bad result can occur from the use of the sulphocarbolates if a pure salt is used and given properly diluted. It is most important before commencing the use of intestinal antiseptics in any case to empty the bowels thoroughly with salines and colonic flushings. Otherwise the result will be disappoint-

ing. In all cases push to effect. There is no limit to dosage other than that.

Perhaps the relation of a few cases will be more instructive and illustrative than anything else I can say.

Case 1. Tonsillitis with constipation, high fever, great prostration. The treatment was calomel gr. $\frac{1}{4}$ with sodium bicarbonate gr. 1, in tablet, one every half hour till bowels moved freely, or for ten doses; then if no action a saline laxative to be given and repeated in two hours. The W-A Intestinal Antiseptics were used internally, one every two hours and also as a spray every half hour. Aconitine was given for fever. The bowels moved freely with the saline, the temperature dropped from 103.8 to 100.8, all the symptoms rapidly improved, and instead of an illness of four days to two weeks, the patient was all right in forty-eight hours. I may add that ice-cloths were kept continually applied to the throat.

Case 2. Infant, with colliquative diarrhea, cold clammy skin, pinched features, vomiting everything taken into the stomach. Hypodermic of atropine gr. 1-500, and calomel (pink) gr. 1-10 on tongue every fifteen minutes for five doses, hot applications to feet and abdomen; no



I take the CLINIC and could not practise medicine without it. It is up-to-date in every respect—Dr. R. E. S. Smothers, Moores Bridge, Alabama.

In England, Murrell has strongly recommended senecin to bring on menstruation. It is said to be effective and harmless. Dose, one granule every hour until the flow appears.

nourishment whatever. Stomach after three doses of calomel retained solution of intestinal antiseptics, one tablet to eight teaspoonfuls of hot water, copper arsenite gr. 1-3000 to each dose, to be given every half hour until effect.

This baby recovered too rapidly from a financial point of view. It was fed on broth and Bovinine in water for twenty hours after symptoms began to improve, and brought to usual diet gradually.

Case 3. Male, 55, temp. 103 degrees, pulse 120, sick one week, diarrhea, offensive rice-water stools, headache, rash on abdomen, some tympanites, no appetite. Ordered calomel and soda tablets every half hour, followed by saline; as soon as the stools altered in appearance the intestinal antiseptics were given every two hours in a glass of hot water, and continued day and night for three days before the stools became inodorous, then sufficient to keep them so. The calomel was repeated on the third day and saline given every morning thereafter. The temperature for the first three days ranged from 103 in the morning to 104.5 degrees at night, but after that time never reached 101.5; and in nine days from commencing treatment, the sixteenth day of disease, temperature and pulse were normal and patient ravenous and able to sit up.

At the same time with this case I was attending nine others, three in one family, all on proximately the same treatment, varied or added to according to complications. The three were so mild that the mother waited on the three their entire sickness, no case lasting longer than three weeks.

The next two cases after this series of nine were given carbolic acid-iodine, three

drops in a wine glass of ice-water every three hours. Both had hemorrhages, both were delirious, both were ill seven weeks. Possibly these were true typhoid cases and serious too. The others I called typhoid; but were so mild, although having the prodromals and temperature range of that disease, that perhaps my diagnosis was wrong.

Now I use the sulphocarbolates solely, preferably the W-A Intestinal Antiseptics, because I have found them more uniform in action, non-toxic, non-irritant (except when given with too little water), and they give better results than any other of the class of intestinal antiseptics.

There is nothing new in the above relation of facts. The cases are not isolated cases, but typical of the good results from the use of these agents in all intestinal diseases and derangements of the alimentary tract.

With best wishes for the continued success of the CLINIC, its editors and the "active principle therapy."

R. J. SMITH, M. D.

Indianapolis, Ind.

ASTROLOGY.

Noting an article in the August CLINIC on Astrology, it may be that full facts as to the way of applying this ancient science to modern therapeutics may be of interest to your readers. I shall touch lightly on the age of the science, which was no doubt a part of the propaganda of the Babylonian and Egyptian priesthood as it is with the Brahmins of today, among whom the priest is as necessary as the midwife in the lying-in room; and the baby who does not have

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The CLINIC has grown in favor until it has become my favorite journal. Cannot afford to be without it.—Dr. L. L. Janeway, Whitwell, Tenn.

It is all right, in some cases, to bank on a man's pedigree; but, in most men, there is something a great deal deeper than this matter of genealogy.

the priest to cast a horoscope of the moment of his birth for a rule and guide to his future, is deprived of one of the essential privileges of his existence.

Astrology to-day is what its exponents have made it. There are two kinds of people who dabble in this science; the charlatans who ply it as a means of livelihood, who depend more on clairvoyance than on mathematics and the amateur who finds in it a most fascinating study, combining mathematics with mysticism. The whole number embraced under both heads is comparatively small, hence all the literature on the subject is written by men who have followed one branch or single idea on the subject in which they differ radically from the authorities. So we find in astrological literature the mass of contradictions mentioned in the August article. Indeed all the literature on the subject is based on a book written by Claudius Ptolemy, an Egyptian mathematician who flourished between the years 127 and 151 A. D. This author no doubt found his facts and figures among the relics of the ancient priesthood, but failed to find the base from which the calculations were made; so to support his claims he put forth what is known as the Ptolemaic theory of the motion of the planets, viewed from a geocentric standpoint. This theory held until it was overthrown by Copernicus, and in the crash astrology was lost with the Ptolemaic system. But it is a notable fact that all calculations of an astronomical nature, navigation, surveying, etc., are conducted on a geocentric basis, regardless of the error of its fundamental principles; hence, why should not astrology be as true as it was before Copernicus made his discovery?



In Strangulated Hernia, if reasonable taxis fails, give a full dose of hyoscyamine, enough to flush the face, and come back in four hours to find the hernia reduced or easily reducible.

In the hands of a priesthood it is evident that astrology must have been employed as an infallible truth, to doubt which was a sacrilege; and the same stand is assumed by the charlatan who plies it as a vocation. He assumes that certain configurations of the planets will cause certain effects, which are indicated by the rules of science, and so prognosticates; and in many cases he is wrong, which causes doubt on the part of possible believers. But among students who have investigated the science without mercenary motives, especially the Americans, the idea is that astrology is simply an index of what will happen if we drift blindly. In this the matter of environment and social standing enters largely. Thus, the positions at birth indicating a thief and blackguard would be true in the slum-bred child, but in another better-situated person might mean a sharp-practising lawyer, a quack, or perhaps a railroad wrecker and Napoleon of finance under proper stimuli.

I have noted that in test readings by American astrologers the delineations on the subjects of life and health are generally more nearly correct than anything else. This leads me to believe that astrology may be employed successfully in the diagnosis of obscure diseases, in which it is hard to determine just what organ or function is most at fault, and this too without entering into the wearisome detail and endless contradiction which the student of general astrology must face.

The liability to disease is judged by the position of the superior planets at the time of birth. The superior planets are Uranus, Saturn, Jupiter and Mars, these planets being farther from the sun

I have no idea of being without the CLINIC which I read with more satisfaction than any journal that comes to my desk.— H. L. Blanton, M. D., Adriance, Va.

than the earth, and their influence is about as follows: Uranus gives acute, sudden and severe disorders which generally yield to treatment. Saturn gives chronic diseases that yield slowly if at all. Jupiter gives insidious diseases of slow nature. Mars gives acute diseases, burns, scalds, bruises, etc. The part of the body liable to be involved is indicated by the sign in which the planet is situated at the time of birth.

Now the point I wish to advocate in the application of astrology to modern therapeutics, is the indication of Saturn in the diagnosis of obscure chronic diseases, in which it is often impossible to determine which is the primary cause of the trouble, owing to the close sympathetic connection existing between the organs and functions involved; as it is much easier to reach such cases if you know where the primary cause lies than it is if you approach it through outlying effects. In this respect astrology must be looked upon as an index, not a cause. The writer has Saturn in Cancer, which rules the lungs and stomach, and is free from any disorder or weakness of either organ and in perfect health otherwise; but between the ages of twelve and twenty had three attacks of pneumonia in light form, was advised to get out into the air and avoid sedentary life for a while; by following this advice for two years he has felt no ill-effects in the lungs since.

There are several things to be considered in regard to the motion of Saturn. This planet makes one complete revolution through the zodiac in about twenty-nine years. This brings it at an angle of 90 or 180 degrees every seven years, corresponding to the ages of periodic change in man. Thus at puberty Sat-

urn is in a square, or 90 degrees from his radical position at birth, and the time when he reaches the radical position by transit at twenty-nine is a very fatal period in the lives of patients affected by chronic ailments, or of people of low vitality.

Those who choose to investigate this science may apply the rules of position, configuration and direction, as enhancing or mitigating the effects of Saturn; but those who do not care to go so deeply may be able to do much by simply observing the position of Saturn at birth as an aid to diagnosis.

To do this, the stock cut in the patent almanac shows the part of the body ruled by the various signs of the zodiac; and a table of the positions of the superior planets for each month of the year, for fifty years back and ten years ahead, can no doubt be obtained from any publisher of astrological literature.

J. R. BAILEY, D. O.

Ashland, Wis.

EPISTAXIS.

I want to report a case of hemorrhage from the nose, of more than passing interest, in which I think gelatin gave good results.

Case:—Mr. J. B. F. is a large man, weighing over two hundred pounds, well-proportioned, thirty-six years old, manager of company.

His health is excellent except for slight catarrh caused by a badly deflected nasal septum.

Recently he consulted a specialist and had the uvula amputated, which was followed by considerable pain and swelling.

The specialist advised that a slight

Too often emmenagogues are given in overwhelming doses. Try the little dose of Apiol, a granule every half hour till effect.

I am highly pleased with the results from your Tape-worm remedy, for it did the work.
—James J. Toalson, M. D., Alta, Ill.

amount of tissue be removed from the lower turbinate to give room for breathing, and this was done after the uvula healed.

This cauterization was done with an acid, and was not followed by any trouble, until the scab which formed was pulled off, when a violent hemorrhage set in, which was immediately checked by the application of the electric cautery.

Two days after, while in another city, the bleeding began again, and a very skillful man worked for four hours before the bleeding was checked, though when this was finally accomplished only a small plug of cotton was needed.

The next day, the cotton having become offensive, the case fell into my hands, and the cotton was removed, a piece of gauze being put in because of a tendency to bleeding, which seemed to be very obstinate.

This was on Sunday evening. On Monday I worked with him for two hours on account of recurrent bleeding, and checked it by thorough packing, which seemed to be efficient, but after midnight on Wednesday morning the bleeding began again, and required five hours for checking. After this there was no bleeding until Friday night, when it began again, and continued until Saturday about the middle of the forenoon, when a posterior packing was put in, through which the blood trickled until Monday morning.

On this day the anterior fastening of the posterior plug was taken away, and in the evening the posterior plug was removed. This was followed by some bleeding, which, however, checked itself, after which convalescence was rapid.

Arsenic should always be given before meals or at frequent intervals. Given after meals most of it is lost.

You will notice that the bleeding lasted for ten days, and you can imagine that a large amount of blood was lost.

Every thing in the way of treatment was tried except styptics, and all to no avail, as it seemed that the burning to which the mucous membrane had been subjected had been very extensive, and the tissue continued to slough off. It seemed too that the blood had no tendency to form a firm coagulum, and the gauze seemed to only pull off more tissue and consequently leave more bleeding surface.

Internal treatment was also given, ergot and digitalis at first, and later ergot and gelsemium; but the results seemed to come from gelatin, which from Saturday on I had given to him in quantity and in every form imaginable. That this was of value is shown, I think, by the fact that when the packing was removed on Monday the bleeding began as freely as before, but checked itself without outside help.

It would be of interest to have the reports of others in the use of gelatin in bleedings.

There is a history of bleeding in this man's family; on account of a tendency to bleed, his father has been advised to refrain from having teeth pulled, and some cousins suffer much from spontaneous nose-bleed. This patient has never had any such history himself, and he well remembers when the blow was struck that made the deflection spoken of.

Personally I believe that the extensive burning and consequent sloughing was the cause of the bleeding, and the gelatin was the means of cure.

E. B. BAYLISS, M. D.

Parkersburg, W. Va.

Autotoxemia accounts for 40 per cent. of the fever. Give Salo-sedatus and get that off your hands; the rest is easily managed.

I have read your account of the case with great interest and under the circumstances think you did exceedingly well. It has recently been shown that calcium chloride has a remarkable effect in these bleeder cases, 30 to 40 grains being given internally every day. Not only so, but while the woman of a bleeder family is pregnant the administration to her of calcium chloride has seemed to prevent the development of the bleeding tendency in her child. Locally I have found a 4 per cent. solution of cocaine the most effective means of checking such hemorrhages.—ED.

DIPHTHERIA.

Case 1. Girl, 7, no history of contagion, and only one other case in the town or vicinity in one year, and that three squares from this case, just three weeks ago. Was called at 9 a. m. Patient had had fever since day before and continued high previous night; no history of chill or chilly sensations, complaining of head, bowels and throat being sore, with some swelling of glands of neck, temp. 104, left tonsil covered with dark or grayish membrane, respiration and circulation correspondingly rapid, face flushed, no appetite, breathing hard when asleep.

Ordered tincture of chloride of iron and tincture of iodine, equal parts. Mix. Direct: Mop the throat every two hours.

Potassium chlorate one dram, hydrochloric acid c. p. one and a half drams; mix and add two drams of tincture of chloride of iron, and then enough water to make up four ounces. Of this give a teaspoonful undiluted every four hours.

Calomel, one grain every two hours, followed by saline if necessary.

Sept. 1, 6 p. m. Temp. from 104 to 105; using acetanilid in about five grain doses, repeated to control fever, which proved to be very stubborn; membrane about the same, also circulation and respiration.

Sept. 2, 9 a. m. Membrane over both tonsils, respiration harsh when asleep, but mother said she always breathes hard when asleep, though there is more or less discharge from the nares, of dirty thick color. Temp. about the same, running up to 104 or 105 after being reduced by the acetanilid. Child very restless at times, circulation good.

Six p. m. Conditions unchanged except throat more swelled, both sides. Treatment continued as at first, with the addition of iodine painted over entire swelled area, and hot flaxseed meal poultices applied. It was difficult to get her bowels to move from calomel given at first visit, bowels and kidneys now acting fairly well but skin dry. Membrane in addition to tonsils now is over uvula and arch of fauces, with other deposit as well, which is the most extensive. Temp. about 103, range some lower; fever powders continued as necessary, salts repeated to keep bowels open, kidneys acting fairly well, swelling of throat some worse, child restless and irritable. Got 2000 units of antitoxin P. D. & Co. While fixing the syringe I spilt about half, consequently only injected from 800 to 1000 units at 3.20 p. m. At 7 p. m. the child was asleep and resting easy. First treatment continued.

Sept. 4, 9 a. m. Conditions about the same, child possibly resting better, some membrane removed with a mop, temp. 103.

Six p. m. Temp. 103, respiration eas-

The Abbott Alkaloidal Co.'s preparations are O. K. They do for me just what they agree to do.—B. P. Quivey, M. D., Mt. Idaho, Ida.

A flushed face, bright eye and full temples, with mental excitement, call for Gelsemine to effect; a granule every half hour.

ier, circulation weaker. Removed some membrane with mop. Child resting better. Treatment continued, adding one dram of good whisky every four hours.

On the four successive days the treatment was continued, the last membrane being removed on the sixth; fever and swelling gradually declining until normal on the evening of the sixth. At 9 a. m. of the 8th there was a deposit adhering to the tonsils and the uvula; all cleared away this morning, leaving a raw surface. Child sitting up playing with doll, appetite good.

Sept. 9, 10:30 a. m. A little white milky deposit on the edges of the tonsils; temperature and circulation normal, appetite splendid, child cheerful and playful, looking about well, medicine continued every four hours.

Sept. 10, 10:30 a. m. Tonsils clear, swelling nearly gone, none apparent on outside. Patient dismissed.

Case 2. Eva H., 16, sister of former patient, seized Sept. 5 with sore throat, white deposit on left tonsil, throat little inflamed, no fever. Applied the mop with the same preparation of iodine and iron; no trouble to remove the innocent-looking but suspicious deposit; gave calomel purge, no other treatment; patient denied being ill.

Sept. 6, 9 a. m. Face flushed, temp. 103.5, throat sore, general aching; no history of chill, white membrane on both tonsils. I at once began applying the iodine and iron every two hours with a mop, also the chlorine mixture.

Six p. m. Temp. 105, patient lying down but said she felt better, membrane had spread. Gave 2,000 units of antitoxin, P. D. & Co., preceded by five grains acetanilid, fell asleep within ten minutes. Other treatment continued.

Scarcely any of the thousands who used Apocynin on Shaller's word failed to find in it a powerful remedy for dropsy.

Sept. 7, 9 a. m. Temp. 101.5, membrane lessened; treatment continued. At 6 p. m., temp. 99.5, membrane nearly gone, patient feeling cheerful.

Sept. 8, 10 a. m. Temp. 100, slept well, very little deposit on tonsils, feeling well but weak.

Sept. 9. Temp. 99.5, circulation unstable on moving, slept well, little white deposit on right tonsil, none on left, no membrane; treatment continued, adding two drams of whisky every two hours.

Sept. 10. Temp. normal, tonsils clean, circulation better; whisky alone continued; ordered rest and good nourishment. Case dismissed.

From the second day this case promised to be as severe as the first one, although an older child. From the rapid changes, I am forced to believe the credit must be given to the antitoxin, the other treatment being identical. The small dose of antitoxin given the first case could scarcely have had much effect.

Dr. Sweatt's case in the September CLINIC was very interesting to me; first, because it required such an unusual amount of antitoxin, viz., 14,000 units; and second, because he was a classmate of mine. O. P. doesn't believe in quitting a good thing.

STERLING PRICE, M. D.

Barry, Tex.

RETAINED PLACENTA.

Mother, 30, midwife left part of placenta; fetid leucorrhea, two ulcers on cervix, a polypus which I twisted off, labia red and hot, uterus anteverted; anemic, ascites and general œdema.

I curetted and applied the W-A Vaginal Antiseptic in solution; giving internally pilocarpine, iron arsenate, the

I have aborted a case of Typhoid Fever in ten days, with the alkaloids and antiseptics. I am pleased.

Heart Tonic, intestinal antiseptics, viburnum, strychnine and Seng. I am happy to say that the dropsy is gone, anemia better, ulcers healed, pruritus well. I am the seventh doctor who treated this case and the only one who did any good. The alkaloids have surprised me. I know when I get a good thing and will hold on to it.

C. B. MITCHELL, M. D.

Manila, Ark.

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I congratulate you on your success with the W-A Vaginal Astringent. We will furnish the rifle and ammunition, but it takes a good shot to secure such effects as you had.—ED.

REMITTENT FEVER.

I have not yet acquired the art of treating remittent fever with small doses of quinine; but have considerable success with a treatment like this: Sodium phosphate five parts, powdered extract of licorice one part. Mix. Direct: A teaspoonful in hot water, with cream added, every two to six hours for effect. Also give two pills of quinine and capsicum two grains each, and five quinine pills two grains each, every day, when the fever is lowest; Dosimetric Triads one every fifteen to forty minutes; an intestinal antiseptic tablet every hour or two as the patient is typhoidal; ten grains of calomel with podophyllin added; diet, raw eggs, corn bread, corn meal hot cake, and grain-heart, with boiled water. This is pretty successful. How can I better it with quinine arsenate and avoid using so much quinine?

I have always had my doubts on the two-grain quinine pill. Sometimes I

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In Lumbago, Pleurodynia, chest-pain when corsets are removed and Rheumatic Sciatica, three or four granules of colchicine daily are quite effective.

fear it is never absorbed; yet I have continued to use it because quinine pills colored pink are not recognized by the patient, and he may be kept oblivious as to the nature of his medicine. When the manufacturer colors his quinine, so it will not be recognized (for all white capsules are believed to be quinine), then I will use capsules, as more soluble than pills. If there is one hobby on which I delight, it is the idiocy that prompts a doctor to tell his patients the drugs given. The secrecy and mystery with which we clothe our methods is half their potency. If a doctor chooses to give himself away, in that proportion he earns the indifference if not the contempt of the average layman.

C. E. BOYNTON, M. D.

Los Banos, Cal.

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If you keep the liver wrung out as you are doing, and simply substitute for adults quinine arsenate gr. 1-6 from three to seven times a day, gradually lessening as the case improves, and changing over to the Triple Arsenates if anemia is present, you will find that the big doses of quinine are unnecessary. It has been a matter of very great surprise to us to find that one grain of quinine arsenate will do the work of fifteen grains of the sulphate.—ED.

GNORRHEA.

I must say Euarol is a "dandy." A young man contracted gonorrhea last July. A druggist gave him a strong zinc injection. Not improving he came to me in August. He constantly complained of pain in urinating, and this

I want to say that your manganese compound tablets are the best I have ever used in acid indigestion.—F. E. Williams, M. D., El Paso, Tex.

pain did not leave the urethra and bladder between the acts, so that life was a burden.

After four visits I introduced a sound, which was painful on account of the stricture and then injected Euarol. He experienced quick relief. Two days after when he reported he announced himself so well that he needed no more treatment. However I injected Euarol three times more.

Last week I saw a man aged 63, who had difficult urination for a year; often feeling desire to urinate but something seemed to cut off the stream. Finally he was compelled to use a soft rubber

catheter, which gave pain two inches inside the meatus. I gave an anesthetic, succeeded in introducing a number eighteen sound and injected Euarol. That evening the temperature was 102; next morning 99, had slept some, and was much easier than at any time for weeks. He passed urine part of the time without a catheter. On the third day I passed two sounds, causing some pain; injected Euarol at once, and in a few moments he was easy. I attribute part of the success to Euarol, aided by sitz baths.

GEO. H. FULFORD, M. D.

Sioux Falls, S. D.

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"WAUGH'S LATEST."

We have just read Dr. Waugh's book on "Diseases of the Respiratory Organs," interleaved, etc. This work was read without fatigue to body or mind; chapters of it were read to wife, and her eyes would sparkle with a gleam of intelligent comprehension, and she would say: "Doctor, I really believe I could become a physician if Dr. Waugh would cover the whole field of medicine with a series of those simple, attractive, interleaved books."

And by the way, why can't Dr. Waugh bring out that promised practice in this style? It would be a pleasure thus to review the whole course of medicine. The style of this work is just what we want; one that will lead you on, holding your attention until you have read the last word, and then close the volume hungry for more.

We read the article on "Chronic Phthisis" this morning, and carefully drew a blue pencil-line under every striking word that would seem to italicize its

importance; and here are our readings, or rather our markings:

"Many a valuable life has been wasted in the vain attempt to win an utterly impossible cure; when under proper management the patient might have lived to the full limit of his expectancy." "How to live the best and longest with tuberculosis is often our study."

"To examine for tubercle bacilli select a grayish bit, spread evenly over a cover-glass previously sterilized by holding it in the flame of a spirit lamp, dry over the lamp, and fix by passing through the flame, stain with carbol fuchsin, decolorize with nitric acid, wash and stain with methylene blue. The bacilli appear as red rods in a blue field."

"Sometimes chills occur so regularly as to induce the diagnosis of ague." On a blank page over against this we wrote: "We have noted this occurrence in two cases, one of a physician who was near the end, who asked us if we ever saw 'chills' consumption. It seemed as though

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The delicate little granule of apomorphine quickly replaces the old-fashioned syrupy cough compounds, when once fully tested.

The CLINIC talks much like one who has a knowledge of what he is talking about.—J. W. Etheridge, M. D., Reverie, Tenn.

they were strangers to him. Quinine has no effect on them." This illustrates the usefulness of the interleaves.

"The most remarkable cases of galloping consumption I have ever known, were in four men who occupied a very small bedroom. One became tuberculous and spit all over the floor, walls and bed. Two of the others were attacked and died, one in six weeks, the other in four days."

"It is therefore evident if care were taken to destroy all excretions of tubercular patients, an end would be put to the affection in time."

Under the head of "Treatment" we find the blue line under such words as: "Elevated Locality." "Silver Plume, Colorado, over 9,000 feet above sea-level." "Spend more time in the open air." "The western slopes of the Rocky Mountains offer the most generally suitable locations, the patient following the south into Mexico as fall approaches, and north into Idaho as the summer advances."

"Mankind is divided into mountaineers and seamen. Some improve the moment they reach the mountains and languish at the seashore, while others find the seashore suits them and do badly in the elevated regions." "When the location has been selected the patient must find some suitable occupation." "So strong is the influence of suggestion that some will improve by disregarding every precaution, and deliberately forgetting that they are invalids." "I have never used alcohol in the treatment of consumption and rarely in any other affections."

"My results are encouraging and the reports from my correspondents enthusiastic."

In all Acute Catarrhs of the respiratory mucosa, begin at once with calcium iodized, one to three tablets every ten minutes, and note how quickly the symptoms disappear.

"This with reconstructive tonics, the arsenates of iron, quinine and strychnine, is the only direct treatment I have recommended."

"The various forms of tuberculin have failed to establish their efficacy."

"Creosote and its derivatives, especially guaiacol, are used to destroy the bacilli. One woman was thus treated until she smelt like a ham and her skin was the color of dried beef."

"The most potent agents I have found are the sulphocarbolates. I have made them a standard prescription in all cases of consumption and have been abundantly satisfied with results."

"Strychnine" as a general tonic is underlined; "the arsenate gr. 1-30, three to seven times daily."

"The pulmonary tract may be cleared out by inhaling the fumes of boiling vinegar for five minutes. Some patients find great relief from inhaling the fumes of burning sulphur." "Ten drops of guaiacol rubbed into the skin in the clavicular region, produces so decided a fall of temperature that some caution should be exercised in its application."

"The value of calcium sulphide in tubercular infection is a question in which I am deeply interested, but which I am not yet ready to discuss."

All this and more. Get the book and read it.

M. G. PRICE, M. D.

Mosheim, Tenn.

PNEUMONIA.

I have never before offered for publication my method of treating pneumonia. Before doing so I will state that I have seen it severely condemned by

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Success to the CLINIC and "the CLINIC family." I obtain more information from its columns than all the other journals that reach my desk.—Dr. J. E. Barnhill, Fordsville, Ky.

many writers in the various medical journals. I have not lost a case of uncomplicated pneumonia, when I have had an even start with the disease, in over twenty years. I exclude two classes of patients, the very young and the very aged. Of the two, the old are more unpromising.

A patient with pneumonia who has passed the age of 65 nearly always dies. It is true, I have had many of this class recover. When the age reaches 70 years, I confidently expect them to die.

Is it possible for a patient with prune-juice expectoration to recover? I have always considered prune-juice expectoration to indicate gangrene of the lung; and of course to be beyond recovery. I have seen written in the CLINIC in the last few months, that patients who had pneumonia recovered after they had the prune-juice expectoration. I have seen this assertion several times recently in the CLINIC. When I see the prune-juice expectoration I positively inform the parties interested in the patient that he will die; and I never saw the contrary yet.

I rely principally upon opium in one of its various forms. I prefer morphine sulphate in solution. It is of uniform strength, certain in effect, dosage small, and is very soluble. I begin at once with 1-8 to 1-4 of a grain every four hours while awake. In extreme cases I give first two or three doses at shorter intervals. I usually first give two anti-constipation tablets (E. J. Hart & Co.):
R. Ext. cascara sagrada gr. 1, ext. nux. vom. gr. 1-8, ext. belladonna (Sears) gr. 1-8, pulv. ipecac gr. 1-8, podophyllin gr. 1-8 (contents of each pill); supplemented with an enema of

warm water and soap-suds next morning if required. I am in no haste to move the bowels, only at first; if there is a free and copious action every other day it answers every purpose.

There is very frequently a marked improvement in the condition after the first dose. After the fever subsides somewhat and the inflammation improves, I administer two or three grains quinine bisulphate three times a day and lengthen the intervals between the opiates, but the dose is usually regulated by only administering it when the patient is awake at the specified periods of taking it. Now I very often apply a large blister to facilitate absorption of the morbid exudates.

I have never taken notes of any case, but I will give treatment and progress of several cases that have occurred in the last ten years, from memory:

Wm. McGraw, returning from court (into the country), a cold night and drunk, was seized with a chill and pneumonia promptly followed (in one lung). Next morning high fever, great dyspnea and expectorating mouthfuls of bloody rust-colored sputa. Administered solution morphine, dose one-quarter-grain every four hours while awake. Found him much improved next morning, breathing better, sputa less bloody and not so tenacious, and fever low. Gave cathartic, assisted by soap-suds enema. He expressed himself much relieved by the first dose of medicine. Discharged patient on fourth day.

Laura McKay, 14; treated her at the same time, treatment about the same. Relied upon the morphine solution and discharged patient on the fifth day. Last



In all cases of Gleet, when calcium sulphide does not promptly cure it is because the dose has been too small. Give two grains every waking hour if necessary. If it fails add to each dose one granule of arsenic sulphide.

In all Hyperemias, equalize the circulation in the beginning by the Dosimetric Triad or the Defervescent, and you will have no inflammations to treat. They give a solar-plexus blow at the start, and the malady is knocked out in the first round.

visit was not imperative. Treated older sister year ago. Blistered none of these patients.

A. R., young man; same course of treatment with rapid convalescence.

Annie Dickson, 4; would not take medicine kindly, had to rely on enemas, gave the solution with gutta percha syringe. Recovered with no untoward symptoms.

I might go on *ad infinitum*.

Mrs. H. (1900), between 70 and 80, had gangrene of the lungs, evidenced by prune-juice sputa, died second day.

Perry (colored woman), 80, prune-juice, died second day.

It is claimed that this solution of morphine would derange the secretions. It certainly has acted well in my hands. I am certain there is nothing superior to it in inflammation of the lungs. It has a controlling influence upon inflammations generally, it relieves pain, controls the distressing and hacking cough, and arrests the distressing dyspnea. The pain which produces so much disturbance causes restlessness and prevents sleep; and this constant annoyance and suffering if unrelieved will of itself kill the patient. If the patient is made comfortable and induced to sleep, nature will restore him to health.

I treated a young white man last June on the alkaloidal plan, successfully, and with much satisfaction to myself. He had *La Grippe* a week or more before taking pneumonia, which very much complicated the case.

I saw in a recent issue of the CLINIC that this disease was more serious and more difficult to treat in summer. I used the Defervescent Compound to reduce the fever, one granule every hour, sometimes every half hour. Gave 1-8 of a grain of calomel and 1-8 grain ipe-

cac every hour for eight successive hours, during the first day or so, after began to treat him. I did not see him until the fourth day of the attack. After the calomel I gave an anticonstipation tablet. For pain when excessive, morphine sulphate gr. 1-8, atropine gr. 1-150, only as demanded. He perspired excessively for a while, for which I gave atropine, (W-A), and had the entire body sponged with turpentine for its stimulating effect, for the prevailing debility as well as for the sweating. There was during the last few days much tympanic distention of the abdomen, which yielded to the effects of the intestinal antiseptics. The disease had a typhoid character from the beginning, and I gave strychnine as a stimulant uninterruptedly during the whole course of the disease.

A. E. WALL, M. D.

Darrington, Miss.

EPILEPSY.

Your answer to Query 2416, states that the epilepsy is due to accumulations of uric acid. Why is it then that serious cases of epilepsy of from five to ten years' standing have been cured by feeding largely on broiled beef, little or no vegetable food, distilled water and simple remedies—relieving of course local spots of hyperesthesia? If the uric acid causes the trouble why can one feed in such cases plenty of beef?

Again, why is it that such cases become epileptic by adding molasses, sugar or other vegetable food which will undergo fermentation? Would it not be well for your valuable paper to look a little further into dietetics, and see that it is not beef, "red meat" (which causes

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Your products are A No. 1. Always get uniform and satisfactory results from them.
—J. A. Hirsch, M. D., Edwardville, Ill.

Enclosed find \$1.00 for the biggest journal in the United States.—J. A. Miller, M. D., Geyserville, Cal.

so many medical men mental fits), that makes the trouble in rheumatism, epilepsy, gout, etc., but the starches, sugars, salads and the feeding of many foods at one time, that are the sinners?

Poor beef, poor "red butchers' meat!" How many sins you have had to answer for! And how many serious cases of chronic disease you have cured by good management, based on frequent studies of blood, feces and urine, enabling the increase of dietary as the patient progresses towards health. Could write very much more on this line.

JOHN A. CUTTER, M. D.

120 Broadway, New York.

TYPHOID FEVER.

I am so well pleased with the alkaloïds that I am persuaded to report a case. Miss W., second week of fever; at 9 a. m. temp. 104, pulse 130, typical typhoid tongue, diarrhea, violent headache and abdominal pain, fever higher in afternoon; no treatment.

I gave small doses of calomel until the liver acted, followed with castor oil and turpentine to make sure of a "clean basis;" Defervescent Compound as needed for fever; next morning quinine, five grains every two hours for four doses; a W-A Intestinal Antiseptic Tablet every two hours. This was kept up for three days, by which the temperature was normal.

I have had several very similar cases, all of which have been controlled with the intestinal antiseptic tablets in short order.

Now if this is typhoid fever I have been led astray in the beginning, and the treatment for typhoid laid down in the text-books is a fake. What shall I call

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One of the most prompt and powerful means of inducing iodism is arsenic iodide. It may well replace the bulky iodides.

it? These people are accustomed to three to nine weeks typhoid, more often called slow fever (which term I abhor, especially when I hear it from a doctor); and a man who claims to break up typhoid fever may at once consider himself the laughing stock of the community, especially of the other doctors.

Whether this is a genuine typhoid or not, I have had the same marvelous results in cholera infantum, diarrhea, dysentery, enteritis, intestinal indigestion, and "just any old kind of bowel trouble;" and if I had to go back to the old way and depend upon bismuth, salol, turpentine, chalk mixture, Dover's powder, etc., I would feel like giving up the practice, for I have more than fully regained that confidence in medicine which every young doctor has before he has had time to go the rounds, try them all and for the most part see them all fail.

I am as yet only a "freshman" in Dosimetry; and I was a "prep" in reality before taking the CLINIC.

J. L. PURSER, M. D.

Chatawa, Miss.

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I fully agree with you that in many instances the text-book is simply a fake, and the deeper you get in Dosimetry the more thoroughly you will realize this. —ED.

CALCIUM SULPHIDE.

I commenced Alkalometry one year ago this January. In the beginning I bought "Brief Therapeutics," "Shaller's Guide to Alkaloidal Medication," "American Alkalometry, Vol. I.," and subscribed for THE ALKALOÏDAL CLINIC. To say I am well pleased with the granules would only be expressing it mildly.

I can't get along without the CLINIC in my business. It is all nice and to the mark.—A. H. Barton, M. D., Murray, Ky.

The Alkaloidal Clinic

I have just treated many cases of scarlatina with them to my great satisfaction: Aconitine to control fever; calcium sulphide as a general antiseptic; intestinal antiseptics to accomplish just what their name would indicate; and saline laxative as a mild cathartic; and we have all that is required in most cases. Of course I should not forget quinine and hyoscyamine.

I have witnessed the effects of calcium sulphide in preventing the formation of pus in several instances. A little girl convalescing from scarlatina had an inflamed gland in the neck near the ear, very red, much tumefied and excessively painful, with every evidence of the formation of pus; but within twelve hours after I began using the granules of calcium sulphide, the inflammation had disappeared and terminated in resolution without any pus.

I had two boils, one to start on my lower jaw and the other on my wrist, and I was satisfied pus would form in both of them. In less than two days after I began using the calcium sulphide, all pain disappeared and both were dissipated, with no pus formation.

In some cases of scarlet fever, when the throat was very bad, I gave calcium sulphide internally very freely, and injected the iodized calcium dissolved into the nostrils with gratifying success. Of course I did not neglect to spray the throat with peroxide of hydrogen when required.

A. E. WALL, M. D.

Darrington, Miss.

NUCLEIN.

I used nuclein in the following case with excellent results:

The CLINIC and Alkaloids are gaining in favor with me every day. Long live the editors to continue in the good work.—Dr. J. G. Stucky, Walnut Creek, Ohio.

Boy, 14, thrown from a car, left kidney ruptured, passed over one quart of blood within one hour. Peritonitis ensued within twenty-four hours, followed by nephritis.

No food was allowed for three days. He was sustained principally by nuclein, two drops four times a day. Gave high enemas. How I wished for your Saline Laxative—found it at Merrell's later. Results amazed everyone, self included. Temp. never went higher than 102 degrees. Boy has been in bed nine days, last three days no fever, no tenderness in bowels, pulse regular and patient hungry, can move by himself, sits up in bed and is doing finely.

I fully believe the good results are due to the nuclein, as the change was perceptible after the first dose. I am using the alkaloids as fast as I understand their use.

W. A. SMITH, M. D.

St. Louis, Mo.

POWDER-SMOKE HEADACHE.

In headache from powder or dynamite smoke, try potassium bromide in ten to fifteen grain doses; or the following:

Acetanilid. gr. 3,
Caffeine cit. gr. ½,
Sodium bicarb. gr. 1,
Acid tartaric gr. ⅛,

Make into tablets or powders, and give one or two every half hour until relieved.

I have used both the above with entire satisfaction. Either is a good preventive if given before exposure to the smoke.

G. W. POTTS, M. D.

New Lancaster, Kans.

For Constipation of Infants dissolve a granule of lobelin in 100 drops of water and give 5 drops every hour until bowels move. This comes near being the ideal infantile cathartic.

AMONG The BOOKS

In reviewing *The General Practitioner as a Specialist* in our October issue, we inadvertently omitted the address of the author and publisher, J. D. Albright, M. D., Pottsville, Pa.



Dorland's *American Illustrated Dictionary*. Second edition, revised. Publishers, W. B. Saunders & Co., 1901. Price, \$4.50, net.

In commendation of this excellently written and most excellently printed and bound book, we beg leave to say that the first edition of it was at once adopted by us as our right-hand consultant, and was on our desk until replaced by this, the second edition. We differ, however, and ever shall, from this and every other dictionary, which terminates the name of a true alkaloid with "in" and not "ine." We hope to see this corrected in another more thoroughly recent work by the same author. Otherwise we have nothing but praise for the work.



Practice of Medicine. Containing the homeopathic treatment of diseases. By Pierre Jousset, M. D. Translated by



Too often emmenagogues are given in overwhelming doses. Try the little dose of Apiol, a granule every half hour till effect.

John Arsachagouni, M. D. Publishers, A. L. Chatterton & Co., New York, Cloth, \$7.00.

This book of 1,079 pages will be found very useful by the truly eclectic, non-sectarian, scientifically progressive physician, who belongs to no school of medicine because all schools of medicine belong to him. Of that honest class the original author and his excellent translator seem to a good extent to be. The great value of this book is that the author and translator do not speak to us *ex cathedra*, but *e clinice*. Hence whenever we shall want to know what a scientific homeopath has to say on any point pertaining to the practice of medicine, we will be able to find a reliable answer in this bulky, but well-bound and well-printed book.



Anders' Text-book of the Practice of Medicine. Fifth edition. 1297 pages, fully illustrated. Philadelphia and London, W. B. Saunders & Co., 1901. Cloth, \$5.50, net.

In the January CLINIC, page 63, the fourth edition of this extensive work was

The CLINIC is a most welcome visitor. Cannot afford to be without its teachings.—Edward Duncan, M. D., Longbranch, Mo.

The Alkaloidal Clinic

favorably reviewed and its merits set forth by one who had tested the book in the class-room; and he said that "no other (text-book) presents the modern views on practice so clearly and succinctly, with so little of the author's personality to be eliminated." This is a rare merit in a work on practice. And to this merit the present fifth revised edition adds the up-to-dateness in every department. No new writer can so well supply this last quality as the active teaching practitioner, who in his practice continually discovers the improvements to be added to the work he wrote for his classes. This is what makes this book so popular and useful.

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Diagnostics of Internal Medicine. By G. B. Butler, A. M., M. D. Publishers, D. Appleton & Co., New York.

This new book on diagnostics is full in every detail of its 1,033 pages and illustrations. The language is simple, clear and uninvolved. As the latest on the scientific arena it ought to include all that is latest in this science of the healing art, whether it comes from abroad or from home physicians. Of course a new work like this, designed as it is to be a handy tool for the painstaking practitioner, will have to wait for the "proof" of its goodness like the "pudding." Meantime we have the guarantee of it in the well-known house that publishes this extensive work. We congratulate on this occasion the old and oft unhurtingly maligned school of liberal practice in this land, from whose midst such works emanate. Let our sun too shine on the just and the unjust.

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I consider the September CLINIC not only the best issue of its own series, but the most interesting and valuable copy of a medical journal I have ever seen.—Dr. Elmore W. Murray, Chillicothe, Mo.

The Pathology and Treatment of Sexual Impotence. By Victor G. Vecki, M. D. Third edition. 12mo., 329 pages. Philadelphia and London: W. B. Saunders & Co., 1901. Cloth, \$2.00, net.

At the beginning of this year the first edition of this monograph came to our hands for review, and in the March CLINIC, page 244, we commended the book as "clean and scientific in tone," and this we repeat of the present revised and mechanically much improved edition. The sexual question both in its scientific and sociologic aspects is irresistibly up for discussion, because no question is settled until rightly settled, and this question has never been so settled yet. The author of this monograph has done a great deal towards a part of the male part of the question, and if some female physician would give us as non-salacious a treatise as this one is, on the female part of this very potent question of female impotency, a needed service would be done for humanity. Vecki could not have written as he did if he was a female, nor can a male write adequately on female impotence, except of what he has heard or felt of the unhappiness it entails, but this is not enough. We trust that many of our clean-hearted scientific female physicians will be stimulated by the reading of this book to do the needed female work. Both they and we male physicians often stand, alas, helplessly at the door of the secret chamber where marital unhappiness begins, which results in either life-long family misery or in public scandal. God grant relief.

I am well pleased with your granules and expect to continue their use, though the Trinity and Defervescent are not as good in malarial as in inflammatory fevers.—H. Q. Alexander, M. D., Davenport, N. C.

Manual of the Diseases of the Eye. By C. H. May, M. D. Second edition. Publishers, Wm. Wood & Co., New York.

In the January CLINIC of this year, page 61, we said what is perfectly just of this work, and we repeat it here in commending this much enlarged and improved edition. "This is not an exhaustive treatise, and is not intended to be so, for it is not for specialists' uses, but for students who hear or have heard lectures on ophthalmology, and who need a resume of the entire range of this discipline. It is also excellently adapted for the general practitioner who ought not to be unacquainted with the latest points on this subject, or to send off many ophthalmic cases to the specialist. Specialism is neither an unmixed good nor an unmixed evil. Besides the honest physician must use the eye as a revealer of many diseased organs remote from it. In all these points this manual (in its improved second edition especially) will be an excellent instructor."

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History of Medicine. A brief outline of medical history and sects of physicians, from the earliest historic periods; with an extended account of the new schools of the healing art in the nineteenth century and especially a history of American eclectic practice of medicine never before published. By Alexander Wilder, M. D. Published by the New England Eclectic Publishing Co., 1901. Price \$2.75, subject to increase.

The American physicians who do not belong to the exclusive school of the so-called Eclectics owe to the National Eclectic Medical Association, and Dr.

Alexander Wilder a debt of gratitude for the work before us. That association requested the doctor in 1890 "to prepare a history of medical reform during the earlier periods." It could not be expected otherwise from a man of Dr. W's erudition but that he would give us at least "an outline of medical history of the earliest periods." He wished as he said in his forewords (p.v.) to put an end to the "ignorance" and "barbarism" which failed to appreciate the past, and have therefore no intelligent view of the healing art. Dr. W. devotes half of the volume, 401 pages, to this outline of medical history which interests us all. It is only to be regretted that the author becomes more and more brief as he approaches more recent times. He would have done a much needed service to the medical profession of every school had he given us a history of medicine in America. As it is he devotes the other equal half of the volume to what he calls "Evolution of the American Practice," meaning by this not the general practice of medicine in America, but that heterogeneous mass of herb-doctors and water-doctors and anti-calomelists and anti-bleeders. This part the author works out with astonishing minuteness. I cannot think of any other medical sect that has had such a detailed history of its origin and conflicts as this exclusive eclectic school has now from the pen of Dr. Wilder. He has done a splendid work for the future historian of medicine in America, who will have there a reliable record of this one exclusive school, which though not universally eclectic is yet known as American Eclectic. Dr. Wilder is very uncomplimentary to the general, non-sectarian Ameri-

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Copper arsenite is a valuable medicine for small and frequent dosage, but apt to disappoint if administered clumsily.

Enclosed find \$5.00 for the biggest journal in the United States.—J. A. Miller, M. D., Geyserville, Cal.

can physicians of that time, and he alludes to them as ignorant, vicious, malicious, persecuting, etc., whose whole intent was (and is?) mere money-making. This is painful reading for one who, like the writer of these lines, while he has a high regard for the writer of this book, yet in his study and practice of over fifty years came in close contact with such men as W. F. Draper, Valentine Mott, Van Buren, Willard Parker, Alfred C. Post, Alonzo Clark, Dalton, Cornelius Agnew and many others in New York, and who learned to know much of the medical coryphei in Boston and Philadelphia; for whose character as gentlemen and just men he cherished as much esteem as admiration for their medical skill, all of whom lived during that very time when the disquieted claimants to the right of medical practice without previous training, little by little conglomerated into that which goes now by the name of eclectics in America. These last characterizations I derive from no other source than from the book of Dr. Wilder before me, whose very faithfulness as the historian of his party made me aware of the character of the early constituents of it, and of the doctor's harshness towards and neglect of that majority who constituted the body of usual practitioners of medicine in America during those struggles of Dr. Wilder's school.

The attentive reader of the second part of Dr. W.'s book will best learn from it, just because it is partisan, what medical-plant fetishism is, and how under the claims of specific tinctures and specific medication it tries to save itself against the inroads of organic chemistry which gives us, the non-sectarians, the certainties of the alkaloids, glucosides and

resinoids, as against the mixed crudities of tinctures.

The medical world at large owes much to the so-called American eclectic school, for many an excellent remedy, and also for that, like every sect and schism in history, this school too favorably reacted for advance and reform on the great body from which it separated itself. But many such a sect and schism stopped stiff and stark in its opinionativeness and failed to join in the progress which the body from which it separated has made and is making. For the good of humanity and for the cause of righteousness, we hope and pray it may not be thus with the American Eclectic School.

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The Ready-Reference Hand-Book of Skin Diseases. By George Thomas Jackson, M. D. Fourth edition. 12mo, 617 pages, 82 engravings and 3 colored plates. Cloth, \$2.75, net. Lea Brothers & Co., Philadelphia and New York, 1901.

The usefulness of this book for the non-specialist in dermatoses is well indicated in the title. It will not supersede the great work of Fox, nor the Stelwagon-Mracek Atlas of the Diseases of the Skin, which were reviewed in this column during the year. But with one or the other on the book shelf, this book of Jackson's will prove the handiest, and so far as we examined it seems to give the latest on points of pathology and therapy. The classification adopted is rational and sufficient to start a diagnostic investigation of any case that may present itself. When that is made this manual will afford the further information needed for treatment.

The book is very compactly printed

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Your products are A No. 1. Always get uniform and satisfactory results from them.—J. A. Hirsch, M. D., Edwardville, Ill.

◆ ◆ ◆ ◆ ◆
It seems that a speedier effect is obtained from the valerianates, of atropine, strychnine, caffeine, etc., than from any other forms.

and contains a vast amount of information. And the price of it, considering the usual excellency of the Lea Bros. & Co.'s publishing work, is pleasingly surprising.

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Photographic Atlas of the Diseases of the Skin. A series of 80 plates comprising more than 100 illustrations, with descriptive text and a Treatise on Cutaneous Therapeutics. By Geo. H. Fox, A. M., M. D. Parts I, II, and III. Publishers, J. B. Lippincott Co.

This is a fine and promising useful work. The size of the plates is twelve and a half by nine and a half, and the photographs are large enough to give a clear idea of the disease. The brief text accompanying the five plates of each number is just enough to orientate the reader in the striking features of each disease, leaving the more extended discussion for the treatise, of which we have now 42 pages.

The plates are very natural and well executed. With Dr. Fox's ideas of the origin of cutaneous disease that they are usually internal, we can well agree, also that the internal cause is "not always due to impurity of the blood." But from the idea that externally applied remedies are of no internal remedial effect, we shall have to dissent in favor at least of some remedies, for the simple reason that the skin is an absorptive organ and in cases of denudation even more so; and as a striking instance we would adduce Dr. Waugh's favorite application of Bovinine to ulcers of the leg.

But Dr. Fox's therapeutics so far keep the happy mean between undue conservatism and undue radicalism, and his hon-

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In Insomnia due to physical fatigue, give a granule of veratrine dissolved in half a glass of water on retiring. Repeat in one hour if necessary.

est and uncommonly good common sense is unexcelled, and that makes him safe as a guide. His good natured dissipation of traditional notions is just and refreshing, and so much the more impressive because he does not go at them iconoclastically. We shall watch with interest the progress of the work, and bid both author and publisher a hearty Godspeed.

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Church and Peterson's *Nervous and Mental Diseases*. Third edition, octavo, 870 pages, 322 illustrations. Philadelphia and London; W. B. Saunders & Co., 1901. Cloth, \$5.00, net.

We are thankful to meet with the word "Anamnesis" in Dr. Church's part of the book. The word stands for the entire sentence: "Previous history of the patient," and is very handy to use in all logical relations of a sentence.

Dr. Church's part of the book occupies 626 pages, and is as full as a book on all nervous diseases could possibly be made; and for further investigation of any individual neurosis direction to its literature is given in foot-notes. These directions might have been greatly and profitably increased.

Dr. Peterson's part of the book is much smaller, only about 113 pages, yet it is very full as an outline of mental diseases, as they are conceived of and treated in the present advanced state of the healing science and art.

We miss in this part of the book any reference to insanity from insolation, an affection which is by no means uncommon. Why did the author omit it? The pathology of it, according to Schroeder Van Der Kolk, is pachymeningitis.

The bringing of these two books to-

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If any reader is unfamiliar with Glonoin, let him ask himself why so many doctors affectionately term it "the little gigantic life-saver."

gether between only two covers, is, despite their one common excellently full index, yet but a mechanical tribute to the truth, that the two subjects are organically connected. We wait yet (and how long shall we do so?) for a psychosomato-physiology, and then for a psychosomato-pathology. But the time is coming, for humanity needs it, when the materialist will be less rabid and the pneumatist more somatic, and the traditional analysis between body and spirit will give place to the synthesis of the one and indivisible genus homo. God speed the day.

The mechanical part of the book is excellent and the abundant illustrations are very serviceable.

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Transactions of the Vermont State Medical Society, 1900.

There is a family home feeling in a great portion of the CLINIC office with Vermont and its doctors, and their yearly "transactions" have a tender attraction for all of us here. It very often happens that an unostentatious set of hard-working country practitioners come together, and speak one to another of things most important, in a most interesting way that is very profitable to listen to. Just so it happens with the papers in this unpretentious but valuable little volume. Space does not permit a review of them but their titles must be given, for many of the CLINIC readers may find some one or more titles that will interest them, and we suppose the volume can be procured:

1. Localization of the lesion in paralysis.
2. Ophthalmic practice by the general practitioner.

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If any reader is unfamiliar with Glonoin, let him ask himself why so many doctors affectionately term it "the little gigantic lifesaver."

3. Epidemic of smallpox in Hardwick, Vermont.

4. Use and abuse of drugs (narcotics, etc.) in Vermont.

5. Puerperal septicemia.

6. Lobar pneumonia.

7. Hereditary transmission of the insane diathesis.

8. Hemianopia.

9. Some evils of aseptic surgery.

10. Vaginal hysterectomy, with case reports.

11. Abdominal palpation in obstetrics.

12. Rupture of uterus in childbirth.

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The Therapeutic Monthly discusses in a very unsatisfactory way the important question of how long the effect of a single dose of strychnine endures. After stating that the effect lasts less than two hours, a case is quoted, singularly bewildering in its omission of essential data, as the time of taking the dose—one grain—of strychnine is not given; and in closing it says: "It was more than two hours since this patient had taken the strychnia;" leaving us to guess whether the writer meant two hours before the symptoms appeared or before they ceased. Finally the inconsequent conclusion is reached that the doses should be repeated every two hours and given subcutaneously.

This fairly illustrates the helter-skelter way in which drugs are administered by the masters of therapeutic ignorance. Compare with the scientific accuracy of Dosimetry—a dose every fifteen minutes till effect, then often enough to sustain the desired effect—never too much, never too little, always exactly enough.

The "Pink Calomel" tablets, calomel with aromatics, never lose a place once occupied in the pocket-case. Children take them with relish.

Condensed QUERIES Answered

PLEASE NOTE.

While the editors make replies to these queries as they are able, they are very far from wishing to monopolize the stage, and would be pleased to hear from any reader who can furnish further and better information.

Moreover, we would urge those seeking advice to report the results, whether good or bad. In all cases please give the number of the query when writing anything concerning it.

Positively no attention paid to anonymous letters.

ANSWERS TO QUERIES.

Comment on Query 2237:—"Trichiasis." I have found electrolysis entirely satisfactory. Put a little cocaine in the eye and use a current below one milliamperé. Patients thus treated are ever after most grateful. Some experience in removing hairs from other locations is essential.

To query 2272: At the Illinois School of Electro-therapeutics we apply supranal extract solution cataphorically, for acne rosacea. It surpasses other treatment previously employed.

MAY CUSHMAN RICE, M. D.
128 State St.

I thank you very much for your kindness in writing in regard to the queries, and hope, whenever you see a chance to better the replies made by the editor, you will do so. I would be glad indeed if others would thus favor me, and have tried every way I knew to induce them to do so, even to the giving of palpably wrong answers sometimes, in the hope of stirring up somebody to reply.—ED.

Reply to Query:—"Dandruff Cures."

At our house we have a boy of 13. Not being familiar with the disease in question my wife took charge and treated him, using one and all the dandruff cures known to us, and so far without any perceptible benefit. However, it has been found on divers occasions during the past several years that with a moderate daily allowance of candy, with some meat occasionally, a luxurious growth would result; that is, the scalp would get literally covered with the dandruff, and *vice versa* if the diet were closely watched. During the month of August my attention was directed to his face. The treatment directed to the eczema resulted in clearing the scalp. Apparently we are led to believe that treatment directed to furfuraceous diseases of the scalp stands on a par with that of the very common disease, diarrhea. An attempt has been made to cure this with

The Alkaloidal Clinic

a single drug, or a combination of drugs. With such treatment the results in such cases are familiar to us all.

A man, aged 40, has used Coke's Dandruff Cure and thinks it good. In this case it is believed that a white spot on the top of the head is gradually growing bigger and his brush in as much demand as ever.

A. W. RINGER, M. D.

Cincinnati, Ohio.

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Report on Query:—I desire to report to you that my patient suffering with prostatic enlargement and retention of urine is doing finely on your treatment recommended. Have not had to use catheter since I wrote you, as patient is able to void urine sufficiently freely, and says he feels as well as he ever did.

Please score one more for the little pills, and on a man who is a physical giant, six feet six inches in height, and proportioned symmetrically.

Treatment was cantharidin and berberine each one granule, phytolaccin three granules, every two hours while awake.

J. W. S., Ohio.

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Reply to Query 2339:—In addition to the tape-worm remedy I would advise a daily enema of normal salt solution or lime-water. Santonin is also very effective.

W. F. RADUE, M. D.

Jersey City, N. J.

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Reply to Query 2364:—Swab the ulcer with pure carbolic acid and curette with a Volkmann's spoon to get rid of the dead tissue; then wash with 2 per cent carbolic solution and put on a compress of antiseptic gauze pressed

out of the same; apply a roller bandage from toe to knee and leave it for three days; then clean with 2 per cent carbolic solution, dry, and apply 12 per cent silver nitrate; then apply a piece of diachylon plaster the size of the ulcer to it, with a roller bandage from toe to knee. Dress every third day. If done antiseptically it will heal very rapidly. Of course Triple Arsenates, four granules each meal, are necessary. If the patient is weak and anemic Somatose is an excellent addition; if stout and constipated, or if kidney elimination is imperfect, give Saline Laxative in the mornings; if gouty give colchicine, with two granules of lithium benzoate every two hours.

W. F. RADUE, M. D.

Jersey City, N. J.

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Report on Query:—"Leg Ulcer." Leg ulcer, six years' standing. As suggested I used iodoform for six weeks—ulcer increased in breadth and depth. Applied Bovinine four times a day—ulcers decreased in breadth and depth, took on a healthy appearance and were almost well, when the patient walked three miles on a hot day; the ulcers broke down again. The Bovinine then applied was not fresh and the ulcers became worse. Then used Hydrozone and Glycozone—ulcers half healed and then stopped. Applied Antiphlogistine—healing renewed but progressively slower. Applied Kennedy's Dark Pinus Canadensis. Returned to Antiphlogistine and alternated. The ulcers are cured.

F. S. D., Delaware.

Iodoform failed because the nerves were not exposed and in need of sedation. Your treatment has succeeded be-

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In autotoxemia of the young, give calcium sulphocarbolate.

For pessimism: Make the bowels clean and aseptic.

cause stimulation of sluggish tissues was needed. Now you had better apply a stimulating lotion every day as a liniment. A mixture of Lloyd's Echafolta with tincture of camphor ought to be about the right thing, or, daily rubbing with distillate of hamamelis. Perhaps the two alternated would be still better.—Ed.

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Reply to Query:—"Interstitial Nephritis." After suffering several years from chronic nephritis I obtained relief from the use of Tritica.

J. W. SCURLOCK, M. D.
New Orleans, La.

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In answer to Query 2374 "Coccydinia," I submit the following: Mrs. M. 22, consulted in fall of '86, complaining of severe pain in lower part of back, from which she suffered since the birth of her child (first confinement) several months previously. When lying on her back she was unable to turn over or get up without assistance. If sitting on a

low seat she was unable to rise without the aid of her arms as levers. On examination I found the coccyx extremely tender, the slightest pressure giving great pain. I used some palliative remedies with very little effect, and after consultation with the late Prof. Goode'll it was decided to remove the coccyx. In order to give needed rest I made an injection into the tissues surrounding the coccyx with 20 minims of 4 per cent cocaine solution. She then slept well during the night and was better next morning. Being encouraged by the result, I repeated the dose the following night with the same happy results. In all I gave six injections and a perfect cure was effected, so I was deprived of my operation. I attended the patient in six subsequent labors and at no time was there any return of the symptoms.

I have not had to resort to this method in any other cases and simply report the facts in the hope that others may try it and report.

T. W. BROCKBANK, M. D.
Philadelphia, Pa.

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QUERIES.

QUERY 2588:—"Post Graduate." I intend to visit Chicago in October for post graduate work. At which of the schools can I get the most instruction for my money?

J. L., Kentucky.

The Chicago Polyclinic is an excellent school for post graduate work. It will depend largely on just what you want whether general work, surgery or specialties. Come and see us, when we will take the matter up with you and talk it over.—Ed.

QUERY 2589:—"Gleet." Man, had gonorrhea ten years ago, occasional burning in the urethra; cystitis two months ago, relieved by eucalyptol. How would you use Euarol?

F. C., Texas.

Euarol should be injected once a day, five or ten drops being deposited in the prostatic urethra. Continue the eucalyptol in this case at the same time. Both should be used for a month.—Ed.

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QUERY 2590:—"Pruritus." Bachelor,

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As emetic, give apomorphine only hypodermically.

For further hints on these queries see our "Ad. Index."

The Alkaloidal Clinic

30, itching scalp and nasal congestion, making him stupid; pulling out some hair relieves, nasal congestion alternates from side to side, no discharge, no catarrh.

J. W., Tennessee.

It is a question whether the trouble with the scalp or that of the nose is the original and the other a reflex. Treat the nasal trouble by spraying with Euarol, in accordance with the enclosed reprint. Apply to the scalp a lotion of carboic acid strong enough to do the work, beginning with a 5 per cent. solution in water and increasing the strength as needed.—Ed.

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QUERY 2591:—"Phosphaturia." I send specimen of urine for examination and suggestion.

A. F., North Dakota.

The sediment consists mainly of phosphates. So far I have found nothing equal to Urotropin in phosphaturia, 30 grains a day, with a large supply of drinking water at the same time.—Ed.

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QUERIES 2592 to 2596:—"Amenorrhea. Girl, 20, strong and healthy, menstruated at 15, never regular, complains of tired feeling.

"Paresis." Wife, 50, strong and healthy, when fatigued left hand trembles and is almost useless.

"Sneezing." A woman has for two years been troubled with persistent sneezing whenever cold air strikes her; some relief if nose discharges.

"Hay Fever." Please suggest treatment.

"Pain in Side." A hearty salesman, carries heavy grips, complains of pain in the right side below the nipple; breathing unaffected, cold air increases it, getting worse.

S. S., Nebraska.

Give that girl senecin, five granules

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Solanine may exist in dangerous quantities in old sprouting potatoes, as well as in green ones.

at bedtime during the intervals, adding during the menstrual week potassium permanganate, a tablet every two hours except when asleep.

Faradism of the affected arm would be advisable, and her bowels should be kept a little loose with Waugh's Anticonstipation granules. Such symptoms may result from toxemia.

For the case of sneezing: There may be a hyperesthetic condition of the nasal mucosa, due to uricemia, hence regulate her diet and give her internally arsenic iodide three granules daily, and from one to three of colchicine, enough to keep her bowels moving. Spray her nose with Euarol thoroughly twice a day.

For hay fever, correct any local disease in the nose, pharynx or larynx which you can find and reach, wash out the nostrils three times a day with warm salt water containing a tablespoonful of hamamelis to the pint, and then spray for five minutes with Euarol. Give internally strychnine arsenate up to full effect, gr. 1-30 three times a day, adding one granule a day until the full strychnine effect is manifested.

Your last case is a neurosis. Possibly he has strained the diaphragm or some of the thoracic apparatus. Let him rub a little strongly stimulant liniment into the spot where there is soreness, every night on going to bed, take one or two granules of hyoscyamine amorphous at bedtime, and arnicin five granules a day.—Ed.

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QUERY 2597:—"Cheap Medicines." When able I will use more alkaloids. The doctors here handle tinctures, fluid extracts and all cheap medicines; making it hard for a new doctor to compete. I will have to keep them for those who

Amorphous aconitine (Merck) has proved of unvarying activity in twenty million granules.

will not pay well and alkaloids for those who do.

I have had good results from the use of Vaginal Antiseptics.

I am very thankful for the kind letter you wrote me about my little girl who has dropsy. She is very much better.

F. M. J., Indiana.

I am glad to hear of your little girl's improvement and hope it will continue. The curative power of youth is wonderful and a child will live through and repair damage simply impossible of recovery to one who has got his growth.

I know nothing which will enable a new doctor to make his way which can compare with the alkaloids; and depend on it, Doctor, you will find people who are willing to pay for the best if they understand it.—Ed.

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QUERIES 2598 and 2599:—"Phthisis." Is there any thing better than zinc sulphocarbonate for typhoid fever?

"Silver Treatment." Can you tell me anything about the silver treatment for lung disease?

Z. R. M., Illinois.

There is nothing half as good for typhoid fever as zinc sulphocarbonate. For your case of lung trouble give lycopin, a granule every two hours during the day and three on going to bed. For the silver treatment for lung trouble, you had better write to Dr. Thomas J. Mays, Philadelphia, for his publication concerning it, which will give you fuller particulars than I possibly could in a letter. For my part, instead of making the injections I would rub Crede's silver into the same spot, which is much pleasanter to the patient.—Ed.

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QUERY 2600:—"Avenin." You have

spoken of avenin as a remedy for paralysis. Where can I obtain it?

W. M., Ohio.

The A. A. Co. makes avenin, the active principle of avena. The dose is from three to six granules a day. Avena has been specially advocated by Benj. Keith of New York. From investigations we have made I am strongly of the opinion that the active agent here is nuclein.—Ed.

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QUERY 2601:—"Venereal Book." What is the best recent work on venereal diseases? I do not want a large volume but I do want a good thorough up-to-date work.

G. S., Ohio.

We have "noticed" in the CLINIC works by Lydston, Fuller, Taylor, and Hyde and Montgomery. These are all good. Of the four perhaps Lydston's is the best. They are all big books, but I know of no really good small one.—Ed.

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QUERY 2602:—"Beauty Book." What is the price of Shoemaker's Beauty Book, mentioned in the August CLINIC?

J. M., New Mexico.

I do not know the price of Shoemaker's book, but you can probably obtain it by writing to the F. A. Davis Co., or to Dr. Shoemaker himself in Philadelphia.—Ed.

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QUERY 2603:—"Traumatism." A weak old man, aged 68 years, crushed his ankle; the tibia protruded four inches over the inner malleolus, fibula unbroken, foot dangled. I replaced the tibia, using very little anesthetic. The heart was irregular every fifth to twentieth pulsation. Sewed up the tear, that

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For further hints on these queries see our "Ad. Index."

In autotoxemia of the aged, or with acidity, give sodium sulphocarbonate.

required nine stitches; fluid discharged abundantly. The flesh above the inner malleolus ulcerated because of the crushing; a large blood-blister formed on the third day above the toes, between the heel and malleolus; the tissues were blue but not dead, red lines up the limb nearly to the groin. For two days fever of 101 to 103 degrees; now 99 degrees in morning. The old gentleman has good courage. The wound is now six days old.

I wish to know if in such a case amputation would be safer than a conservative treatment. The tissue half way around the ankle is gangrenous and ulcerated, but the foot is warm, toes movable, and he has little pain, though good sensation. The patient is rational, bowels free, appetite good. I have applied creolin, H_2O_2 and boric acid; redress daily.

C. B., California.

Under the circumstances I would give the man the chance of holding onto his foot. Far better remove that gangrenous tissue, however, and dress with Antiphlogistine, pushing nuclein and the tonic arsenates to increase his vitality, as it is evident he will pull the leg through if the stock of vital force is sufficient.—Ed.

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QUERY 2604:—"Insomnia." In June I was attacked with insomnia, which lasted six weeks. I kept at my work until I broke down, nerves completely shattered. For eight nights no sleep; Bromidia gave temporary relief. Doctor prescribed nuclein tablets and Nervine granules, and I took a three weeks' vacation; strength came back rapidly, but sleep does not improve much. I have good appetite, bowels regular, feel well, except I get only three hours' sleep and sometimes not that. Sometimes I get three good nights' sleep and then I feel like a new man.

My position for years has been inside. During December I put in sixteen hours daily, had no vacation until

married June 4, and then three weeks; sexual intercourse has not been carried in the least to excess.

B. C., Illinois.

I look upon the inability to sleep as in all instances a condition requiring the gravest solicitude. It is so certain that a man must sleep when the time comes, that preventing sleep was one of the most frightful tortures of the Inquisition. Hence, insomnia if continued more than a night or two is always a symptom of a grave condition of affairs.

Now, here are some reasons for insomnia: First, the habit of carrying one's business cares and worries to bed with him. For this the remedy is a not too interesting book to read an hour or so before going to sleep. I know nothing better than to take a volume of the Encyclopedia, begin at the first, turn over the pages till you come to something you do not already know, read this item and then go on to another, and so on until you are sleepy. Then when you have put out the light think of something that will keep your mind off thoughts interesting enough to keep you awake. A very good plan is to begin to think of all the names of cities you can, commencing with those beginning with the letter "A" and so on. This is a never-ending source of somnolence.

In the second place, sleep sometimes fails to come on account of nervous mental exhaustion or fatigue. Here the best remedies are a prolonged warm bath, a bowl of hot clam-juice or of plain hot water, or a single granule of caffeine valerianate. If this seems to keep you awake make the dose less. The object is to produce nervous equilibrium and an over-dose or an under-dose will not do this.

Brucine in watery solution cures earache when applied locally.

In autotoxemia with diarrhea, or of microbic origin, give zinc sulphocarbolate.

A third condition is loss of phosphates in the urine. It would be wise to have the urine analyzed and see whether this is present. Sometimes, however, the cause lies in a certain excitation of the nervous system, due to long continuance at a certain routine, and here a change of occupation is the only remedy. When it is evident that a man needs a change of occupation, or a prolonged vacation, I never lower my art by giving him in hypnotics the means of continuing longer the life which is ruining him, and then rendering the nervous break-up more complete when it does come. My experience of many years leads me to the conviction that postponing such a change is little short of disastrous.

I judge that from what I say you will be able to select what suits you, and if I haven't struck the right thing yet, I shall be glad to hear from you again and give you any further advice in my power. If the clam-juice at bedtime is not palatable or acceptable, I have often replaced it with the granules of avenin, one-half dozen in a glass of hot water, and find good results therefrom.—Ed.

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QUERY 2605:—"Bladder: Irritable." Man, single, 40, frequent and painful micturition, up many times at night, worse during day, urine scalding, pain before, during and after flow, intense itching follows; pus precedes urine, cloudy and offensive, gonorrhea 18 years ago, lost thirty pounds.

J. S., North Carolina.

Give the man benzoic acid and arbutin, a granule of each every hour except when asleep. Also inject into the prostatic urethra a few drops of Euarol once a day. If you get it into the bladder so much the better. His vitality

Oil of cassia repels mosquitoes better than pennyroyal.

seems to be below par, so that a course of Triple Arsenates with Nuclein should follow. If the pus continues after one week's treatment, add to the above arsenic sulphide five granules a day.—Ed.

✽

QUERY 2606:—"Boils." Man, 22, since 15 pestered with numerous small boils, on face, neck, breast and shoulders; boils the size of shot, skin seamed with cicatrices.

J. C., Texas.

Let him take a full dose of Saline Laxative every morning, and before and after each meal and on going to bed, one granule each of arsenic iodide and sulphide, making seven granules a day. Let him also bathe the affected skin with Stiefel's Menthol Soap, making a thick lather of it with a shaving brush and applying to the skin wherever the boils have been, letting it dry and remain on all night. In the morning it should be washed off and rinsed with pure water. I am quite satisfied that within a few weeks he will be well on the road to recovery. Some physicians claim that this affection, as well as several others of the skin, is dependent upon the habit of self-abuse. If this be the case he will not find a permanent cure while that continues. For myself I do not take much stock in this theory, but thought it was well to mention it, since it sometimes explains the cause of non-success.—Ed.

✽

QUERY 2607:—"Podophyllin." What is the difference between podophyllin and podophyllotoxin?

J. P., Massachusetts.

The objectionable feature of podophyllin is its tendency to griping, and besides it is somewhat variable, as not being a true active principle but a concen-

For further hints on these queries see our "Ad. Index."

The Alkaloidal Clinic

tration. Podophyllotoxin is more uniform and more powerful. However, I have no trouble with the griping, because I never give podophyllin in larger doses than gr. 1-12 once a day.—ED.

✽

QUERIES 2608 and 2609:—"Colds." Where can I obtain the apparatus for sterility mentioned in the book on Sexual Hygiene?

In kidney cases from colds due to a soaking, the symptoms are not manifested for months, then there is pain over the kidneys, debility, urine 1030 and burning on passage. I have used potassium citrate, sweet spirits of niter, digitalis, broom and buchu. What alkaloids can I use and hold this business in my office?

My use of alkaloids is growing.

N. W., Ontario.

You can obtain the wire speculum from Tieman & Co., New York City. We are at present at work upon an improvement, which as soon as completed will be announced in the CLINIC.

In the cases you mention, I would substitute sparteine for the scoparius; digitalin or digitonin according to the condition of the pulse, the latter probably replacing both the digitalis and the niter; arbutin instead of the buchu, and lithium benzoate for the potassium citrate. This combination I think would prove very effective.—ED.

✽

QUERY 2610:—"Cystitis." Woman, 28, cystitis for one year; Euarol irritates.

F. S., Iowa.

Let this lady take lithium benzoate and arbutin, a granule of each every hour except when asleep; and during the evening one granule each of hyoscine hydrobromate and hyoscyamine amorphous, every half hour until the mouth begins to feel dry. If properly warmed and gently introduced, the

♥ ♥ ♥ ♥ ♥ ♥ ♥ ♥

Brucine and cocaine make an excellent local anesthetic where cocaine alone acts badly.

Euarol would be effective. The bladder should be first washed out with boric acid solution, warmed, and then an ounce of the mixture thrown in.—ED.

✽

QUERY 2611:—"Cancer." I send you a section taken after death from a pyloric nodule, of which there were many.

J. A. Indiana.

The specimen is found to be carcinomatous. In regard to the former examination, permit me to say that the laboratory simply reports its findings, and when it says that no evidence of cancer has been found, it does not necessarily show that no cancer exists. Just so in examining sputa, there might be a few tubercle bacilli in one solitary bit out of an ounce of sputa, although as a rule when tuberculosis is present the bacilli are pretty well distributed.—ED.

✽

QUERY 2612:—"Dyspepsia." Man, 29, consumptive tendency, for years heavily coated tongue with bad taste, resisting all treatment.

J. B., Nebraska.

Give this man with the dirty tongue: Potassium chlorate powder one dram, dilute acid hydrochloric one dram. Put these in a 4-ounce bottle and when the chlorine fumes fill the bottle, fill up with water. Let the man take from one to three teaspoonfuls of this before each meal in an ounce of water. Tell him not to eat too much, to chew his food thoroughly and long, and drink no cold drinks with his meals.—ED.

✽

QUERY 2613:—"Post-graduate." I expect to spend a month in Chicago. Please recommend me a good clinical school. I expect to meet Dr. Abbott, to

For Sexual Unrest and erethism: Cypripedin.

whom I owe much of my success in the practice of medicine.

J. B., Washington.

The best post-graduate school for you will depend a good deal on what you want. The Lakeside Hospital has a very fine post-graduate clinic. The Chicago Polyclinic on the north side has fine clinics also. Dr. Byron Robinson you probably know very well without any introduction from us. In gynecology and abdominal surgery his course has given satisfaction to everyone we have sent to him. If you want electricity go to Neiswanger's school. The Eye, Ear, Nose & Throat College has a magnificent outfit and clinic in those specialties.—Ed.

✽

QUERY 2614:—"Impotence." Mother, 30, healthy and regular, has absolutely no sexual desire or pleasure, intercourse being detestable to her. This is going to break up the family, and I ask if you can give me any aid in the matter. She is a most excellent woman in all other respects.

J. M., Kentucky.

What you want for this case is our book on Sexual Hygiene, just issued, the price of which is \$1.00. Read it from cover to cover, and you will not need to ask any such questions. It was to meet the need of just such cases as you describe that the book was written.—Ed.

✽

QUERY 2615:—"Nostrum." What is the formula of Nathan Tucker's Asthma Remedy, of Mount Gilead, O.? It is used as a spray in an atomizer.

Does any journal make a specialty of publishing such formulas?

H. E., Vermont.

We haven't the formula of Tucker's Asthma Remedy, but would bet a "fip" it consists of cocaine. "The New Idea,"

For further hints on these queries see our "Ad. Index."

published by Stearns & Co., of Detroit, makes a specialty of these formulas.—Ed.

✽

QUERY 2616:—"Nephritis." I am 23; six months ago I found I had chronic parenchymatous nephritis, heart dilated, arteries sclerosed, short breath, much albumin in urine; have improved under treatment. The alkaloidal plan is the only rational way of treating disease.

L. M., Kansas.

The best advice I can give you is that if you haven't Dr. Waugh's "Treatment of the Sick," get a copy at once. This matter is fully considered in it and the treatment given for desquamative nephritis is so successful that in twenty years I have never lost a case. It is too long to write in a letter; besides, you need the book in your practice. Call on us again, Doctor, whenever we can be of use to you, and if this is not satisfactory write again.—Ed.

✽

QUERY 2617:—"Nephritis." My wife has interstitial nephritis, headache almost constantly, dyspnea and vertigo, worse after eating, constipated, pain over right kidney, no albumin.

W. E., Texas.

As a palliative in interstitial nephritis glonoin stands at the head of remedies. For severe headaches and similar acute attacks pilocarpine to the physiologic effect is most valuable. Besides this, keep the bowels clear with a morning dose of Saline Laxative, and avoid in the food an excess of nitrogen, as I see you are doing. This covers the treatment and is very satisfactory. Do not be afraid of pushing the glonoin, or of using pilocarpine to the full effect for the headache and dizziness.—Ed.

✽

QUERY 2618:—"Animal Extracts." Is

In chronic gastritis, give silver, juglandin and copper arsenite.

there anything of value in Hammond's Medulline and Cerebrine in locomotor ataxia?

E. D., New York.

I was not favorably impressed with Hammond's preparations years ago, and do not favor their use. It would be worth while to try Armour's Orchitic Extract in these cases.—Ed.

✽

QUERY 2619:—"Renal Colic." Woman, 54, severe pain along right ureter, with tenderness, also over bladder; similar attacks some months apart for three years; hyoscyamine and strychnine gave slight relief. Father, mother and sister died of cancer.

J. L. C., Oklahoma.

If this is renal cancer there will be blood in the urine. This should be examined with the microscope. If due to a calculus, it has not left the kidneys, but remains to worry her. Add glonoin to the remedies for the paroxysm and arbutin three granules every waking hour to those used in the intervals, and you will have done all that medicine can do.—Ed.

✽

QUERY 2620:—"Urethral Hyperesthesia." Man, 25, single, troubled for past year with difficult urination. At times has to strain to start stream, which is very small and lacks force; no pain on urination, but urethra is tender and very painful to sound. Complains of fullness in bladder, but has no desire to urinate more than 4 times in 24 hours. Had gonorrhea a year ago, mild course, recovered in one month without complications. Has seminal emissions once or twice per week, but no desire whatever for women, general health good, bowels regular, in fact feels perfectly well except for the difficulty in urinating. Can find no stricture. Wants to marry but is afraid to. Careful examination of

urine shows nothing abnormal, prostate slightly enlarged.

J. L., Missouri.

This man will quite certainly improve if you give him Urotropin thirty grains a day, and inject Euarol into the urethra once a day. This treatment has succeeded better than any I have ever used or heard of.—Ed.

✽

QUERY 2621:—"Pravaz Syringe." What is the Pravaz syringe mentioned in French journals?

S. L., Connecticut.

The Pravaz is simply the ordinary hypodermic syringe as used in France.—Ed.

✽

QUERY 2622:—"Polyuria." My wife had influenza last winter, since which she passes each day 160 ounces of urine, containing 1160 grains of solids. She is very nervous, feels like screaming, exhausted after a short walk or on writing half an hour, sleeps well on emetin. The chlorine water and nitromuriatic acid have done the most good.

J. M., Texas.

Try to soothe the irritated kidneys by giving arbutin, in pretty full doses through the day, driving some of the flow to the skin by pilocarpine and some to the bowels by Saline Laxative. After this has been fairly accomplished, give berberine gr. 1-6 four times a day to contract the vessels to some extent. This is all that occurs to me now as likely to be of value but I strongly suspect that a complete change of climate for a month or two would be of value.—Ed.

✽

QUERY 2623:—"Distemper." Have you anything new to act on the mucous membranes of dogs during the catarrhal fever we call distemper?

W. C., Colorado.

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As expectorant, give apomorphine only by the stomach.

Gleet was cured by an accidental injection of the A. A. Co.'s Tapeworm Remedy!

I have recently been employing calcium iodized in the beginning of acute human catarrhs, giving one to three tablets every fifteen minutes, until slight indications of iodism are evidenced, with remarkable results in the way of promptly jugulating the attack.—Ed.

❖

QUERY 2624:—"Phthisis." I send sputum and feces from a man, 44, clinical picture of advanced tuberculosis, hectic, night -sweats, emaciation, cough, muco-purulent expectoration. There are two features that do not conform to tuberculosis; a ravenous appetite and absence of hemorrhage. His digestion is poor, especially the intestinal. His disease dates back two years, when he had *grippe*. He has morning diarrhea, at times almost of pure pus.

S. S., Mississippi.

Mixed infection, primarily pneumonia not yet tuberculous. The treatment of chronic pneumonia, and persons disposed as this man is to tuberculosis, is fully considered in Waugh's little book on the "Respiratory Organs," which is just published. It is far too long a subject to be treated in a letter, but I think you will believe the book to be well worth the price. In fact so sure am I of this that I send a copy herewith and if the book does not suit you, send it back.—Ed.

❖

QUERY 2625:—"Abscess: Mammary." One year ago Mrs. H., primipara, developed abscesses in both breasts, losing a greater part of both glands. She expects to be again confined next month. Shall I dry up the milk or let the baby nurse?

W. A., Washington.

Give the woman a chance to nurse her baby if possible. Let the breasts be well rubbed twice a day with hot cod-liver

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Brucine is a better stimulant for children than strychnine.

oil, containing a small portion of iodine, to promote absorption of the relics of the old inflammation, loosen up adhesions and set free any of the gland substance that still remains to do its duty. Especially see that the nipples are drawn out by a breast pump and rubbed with hot oil so, as to prevent the formation of cracks. Let the vagina be kept aseptic by the careful use of the W-A Vaginal Antiseptic, and as soon as the baby is born have its mouth washed out by the same in solution, before each time it is put to nurse.—Ed.

❖

QUERY 2626:—"Gastro-intestinal Catarrh." I have suffered six years with my stomach, and irritability of heart. At Johns Hopkins Hospital Dr. Osler pronounced my heart normal, advised me to quit tobacco and sent me home, with no opinion as to my trouble and without advice as to treatment. They examined the contents of the stomach but gave no opinion, except that I got his assistant to say that the stomach was a little too acid. Gave nux vomica, soda and possibly bismuth with it. So far as I could see everybody able to be out of bed took this treatment. He intimated that I had hysteria.

I write this now as my condition is very much like it was then. I am perfectly willing to plead guilty to hysteria and realize that my mind dwells too much on my trouble, but what I want is relief from the symptoms that were the primary cause of my brooding. I have at rather long intervals nervous spells, get frightened and want to go home, feel as if I would not live to get there. These spells begin to wear off in a few seconds to a few minutes, and I am almost sure they have their origin in the stomach. When I eat I feel as if I had swallowed a wedge, from thirty minutes after meals to probably three hours, then comes on a feeling of emptiness about as disagreeable. Some days I belch gas; not occasionally but all

For further hints on these queries see our "Ad. Index."

day; this gas is tasteless. I seldom eat a meal that I don't taste afterwards. Usually my food seems to turn over and then settle back. Latterly I am a little constipated, alternating with diarrhea. My bowels are not much involved but are likely to become so speedily. Pain, a dull heavy ache in epigastrium, steady pain in left chest about one inch below and one to two inches to left of nipple lines; when it comes it hurts for hours and then disappears. I have pain also at times in both pectoral muscles or structures beneath them. This pain invariably comes on when I exercise a little too freely, but occasionally when at rest. For a month I have a bi-temporal and frontal headache, nearly always in the morning, gets better when I eat my mid-day meal as a rule. I am more nervous in the forenoon though occasionally I get upset in the afternoon; no catarrh of upper air passages, but my olfactory apparatus is not as acute as it should be, hence can't say much about odor of my stools, though don't think it bad. I am almost entirely impotent, though I assure you this gives me no trouble except that it may be evidence of a general nervous breakdown. My trouble is not caused from over-work, because my work has never been heavy; besides I am not built that way—always had the reputation of being lazy.

S. S., Mississippi.

The examination of the stomach contents shows considerable free hydrochloric acid, also yeast cells present. From these and my knowledge of your case, I deduce the following suggestions:

Begin with the skim-milk diet, taking from one-half to one glass, hot, every four hours, night and day. As variants from this, buttermilk, junket, koumyss, the freshly pressed juice of any conveniently obtainable fruit, the raw white of egg stirred into the milk. After one week of this add to each dose one slice of thoroughly dried toasted stale bread, or you can use one of the predigested

foods, such as Milkine. After a week of this add very carefully to your diet, rejecting anything which disagrees. You must take your food hot, eat it with the utmost slowness, taking at least fifteen minutes to eat one glass of milk. The toast must be eaten dry and not dipped. Take absolutely no cold drinks of any description. Before each of your four-hour meals take juglandin gr. 1-6, silver oxide gr. $\frac{1}{2}$, copper arsenite gr. 1-250. After each meal take papayotin two granules, and if you have acidity take 30 grains Merck's chemically pure sodium bicarbonate, or else one compound manganese tablet every five minutes until six have been taken.

Now, one thing more and that of the utmost importance: Pass a bougie into the bladder and note if any portion of the urethra is sensitive. If so, you must use Euarol, once a day. I am inclined to suspect that herein lies the cause of the impotence you mention for the first time, and possibly that from this originate the gastric troubles and cardiac distress as well.—Ed.

✽

QUERY 2627:—"X-Ray Burn." In May I tried to get a radiograph of my right lung and got a severe burn instead. The operator, Dr. E. M. Robb, of the Texas International Sanitarium, used the tube on me. He kept my chest exposed twenty minutes and had the tube within five inches of my breast. Result, in eight days a burn over entire chest, but burned deeply over the middle of the sternum. The superficial burn healed readily but the deeper burns refuse to heal at all. The pain is intense at times due to the inflamed nerve-endings in the granulation tissue at the margin of the burn, producing pain like neuralgia complicated with fire applied direct to the skin. Now the sore is about one and one-half times the size of a silver dollar and is covered with a yellow pseudo skin

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Colchicine covers a multitude of sins (dietary.)

For greasy taste: Copper arsenite and juglandin.

or membrane. It is almost without sensation except on pressure, but the margin where the skin is red and granulated is very tender, exquisitely painful to pressure, at times hurts continuously and is very painful when the dressing begins to dry out.

I have used almost everything in the way of ointment used by the medical profession, boric acid, zinc oxide, iodoform, Antiphlogistine, lead and opium, olive oil and carbolic acid, and am now using Unguentine, an ointment containing carbolic acid, alum and ichthyol. The olive oil in the first stage of the burn was the best dressing, but of late the Unguentine was found the most soothing, though not apparently reducing the size of the ulcer, for the past six weeks. One corner of the ulcer is very much more painful than the rest of it. The nutrition being so much below normal, owing to lack of tissue beneath the ulcer, and to the constricted condition of the blood-vessels, what will increase this and make it heal? Will a battery using alternate currents help to heal it—galvanic one day and faradic the next, using the negative pole over a punk electrode?

B. M. H., Texas.

Brush the surface of the ulcer over with a one per cent solution of silver nitrate. Follow this with a poultice of slippery elm to remove the dead tissue, then cleanse and dry thoroughly, and dress with Bovinine, renewing it twice a day. If you can obtain the scales curried from a horse under proper conditions, hold this in reserve as the next expedient if the former fails. Have a young, sound, healthy horse taken, the skin well washed, and then having curried deeply so as to get the epithelial scales with as much life in them as possible, use this as a dressing. Some of the scales will take root and you have an improved skin grafting.—Ed.

since which nothing she eats has agreed with her. Eating occasions a nasty taste, followed by sour water rising in the mouth, scalding the lips, little ulcers coming under the tongue; very anemic, extremities swollen; no heart or kidney trouble, spits as if salivated, from a pint to a gallon daily; sense of pressure in head; menses stopped since February; all treatment has failed.

R. D. N., Georgia.

Let this young lady take Waugh's Anticonstipation granules, three before each meal or just enough to give her a good motion of the bowels daily. Increase the quantity to six or nine at each dose, or lessen it if too much. Give her one Compound Manganese tablet before and after each meal and one at bedtime, making seven a day. The following is the dosimetric treatment of dyspepsia according to Castro: For atony with flatulent dyspepsia, strychnine sulphate and quassin; with dilatation, euonymin, hydrotherapy and electricity; for spasms, vomiting and eructations, hyoscyamine and strychnine; for apepsia, pepsin and hydrochloric acid; for foul eructations, iodoform and quinine salicylate; for putrid dyspepsia with enteralgia, aconite; with vomiting, atropine; for acid dyspepsia or pyrosis, sodium arsenate, lithium carbonate; for heartburn, cicutine and cocaine; for mucous secretions and vomiting, quassin and brucine; for pain, morphine hydrobromate and hyoscyamine; for anorexia, quassin, piperin, veratrine; for bulimia, atropine and morphine hydrochlorate; for heterophagia, strychnine and hyoscyamine; for deficiency of pancreatin, diastase and pepsin; for acholia, iridin, colocynthin and elaterin; for intestinal atony, jalapin and brucine.—Ed.

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QUERY 2628:—"Waterbrash." A mother, 31, had *grippe* in February last,

For fault-finding: A grain of emetin at bedtime. Repeat as needed.

❖
QUERY 2629:—"Spermatorrhoea." Defecational spermatorrhoea, absolutely no

For further hints on these queries see our "Ad. Index."

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irritability of the prostatic urethra, ducts patulous, no night emissions, sexual apparatus otherwise healthy, erections normal; diagnosis made by microscope; electricity and Euarol have no effect.

F. G. L., Illinois.

Apply hydrastine locally, injecting 1-6 of a grain of the white alkaloid dissolved in ten to twenty drops of water, into the prostatic urethra once a day, and give the same remedy internally, gr. 1-6 three times a day.

Castro's treatment is: Dominant: Atony, strychnine arsenate and ergotin; reflex hyperesthesia, cicutine; vesical hyperemia, aconitine. Variant: Apepsia, pepsin; anorexia, quassin and piperin; cerebral torpor, atropine; impotence, strychnine hypophosphite; fecal retention, Saline Laxative; general debility, iron and strychnine arsenate and phosphoric acid.—Ed.

✱

QUERY 2630:—"Dysentery." For two days I have had dysentery, bloody stools, tormina, no fever. Before this occurred I had spent a night in short swathing (Kneipp fashion), arising feeling well and as gay as a bird.

J. D. Wisconsin.

Take a small dose of Saline Laxative in a glass of cold water; then take an Intestinal Antiseptic tablet every two hours through the day. If there is any disposition to straining add to each dose three granules of emetin gr. 1-67 each. If the stools continue loose after twenty-four hours without improvement, add to each dose of the Intestinal Antiseptic three granules of silver oxide gr. 1-12 each; while if relaxation with loose stools be the condition, strychnine hypophosphite gr. 1-134 every hour or two while awake is the remedy. I should also prefer hot injections if there is straining; if not, lukewarm injections

with zinc sulphocarbolate five grains to the ounce, or silver nitrate 1-8 gr. to the ounce.

Dosimetric treatment for dysentery. Dominant: For parasitic element, emetin. Variant: For acholia, calomel, Saline Laxative; for fever, aconitine and quinine hydroferrocyanate; for pain and vomiting, aconitine; for debility, strychnine and gelsemin; for hemorrhage, ergotin; for ataxia or delirium, camphor monobromate; for rheumatic pain, colchicine; for perityphlitis or periproctitis, iodoform and sodium arsenate; for paralysis of the sphincter ani, strychnine hypophosphite; for jaundice, colchicine and strychnine arsenate; for malaria, quinine salicylate; for gangrene, ammonium salicylate and antiseptic enemas; for the chronic stage, aconitine, sodium arsenate, emetin and hyoscyamine.—Ed.

✱

QUERY 2631:—"Phthisis." How much nuclein solution would you use for a single injection, for a lady, 33, in advanced phthisis? Have you any confidence in your antitubercular granules No. 425?

C. B., Missouri.

Use 20 minims of nuclein once a day. This is enough, although Dr. Brewer uses even larger doses. I would prefer the single large hypodermic, rather than the multiple small doses, unless there are objections to the use of hypodermics with the case. No. 425 is one of the compound granules which have recently become quite popular in France. It was presented as an exponent of the modern trend of Dosimetry in France. Personally I have not much confidence in it, but that does not mean that I would not give it a fair trial, as well as anything else. We cannot afford to lose any chances whatever of curing phthisis.—Ed.

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In infective cholangitis give boldine.

Capsicin is good for an alcoholic stomach.

NEWS, NOTES AND NOTIONS.

The inner lining of an eggshell is good material for skin-grafts.

❖

Dr. J. C. Hancock, Dubuque, Iowa, has secured orders for a general vaccination.

❖

Miss Chaffin, of Hartford City, Ind., is the latest victim of the drugstore "headache powder."

❖

Shanghai fever is now said to be due to a mosquito—probably a regular Shanghai among mosquitoes.

❖

Dr. B. F. Slender, of Springfield, O., remained unconscious for five months from an effusion of blood on the brain, but is recovering.

❖

So many times it has been said that the castor plant keeps away mosquitoes, that we wonder if any one has yet investigated the truth of the tale. Does any one really know?

❖

Some day the laundry is going to be attacked as a disseminator of infectious diseases. Then some one will make capital by instituting and advertising an "Antiseptic Laundry."

Dr. Fuchs, of Chicago, has discovered a method by which skiagraphs of all soft tissues may be made as well as of bones.

❖

Dr. Bracken, of the Minnesota Health Board, has had a supervisor fined for not quarantining a case of smallpox. A little of that medicine does much good.

❖

The Rogers Park Women's Club has declared war against scarlet fever.

❖

Dr. J. D. Bullock is endeavoring to have the flies exterminated at Lonaconing, Md.

❖

Is the mosquito responsible for the spread of smallpox? More likely it is the housefly in this instance.

❖

In Alameda, Cal., of fifteen families with diphtheria all but one used milk from the same dairy.

❖

Here is one of the items that make every man who has a heart murmur a fervent *thank God*: "Rev. Father Coyne, who contracted smallpox while visiting the sick, was discharged cured." We may not be Romanists, but the fearless devotion of these men to such duties wins our unbounded respect and admiration.

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Try lemon juice for epistaxis; one part to three of water.

Dr. H. L. Cokenower, of Clarinda, Iowa, has been very ill with dropsy.

Dr. Arthur Vinton, of Muncie, Ind., lost his wife from typhoid fever in August.

Of a party of girls who camped at Odell Lake, O., four have been seized with typhoid; one dead. Bad water.

Philadelphia still drinks water from a sewer known as the Schuylkill, and enjoys typhoid fever as a continuous luxury.

Dr. D. G. Murrell, Paducah, Ky., has found a case of dextrocardia among the employees of the I. C. R. R. shops at that place.

At Hiram, O., of 100 guests who attended a banquet, 60 developed typhoid. One of the delicatessen served was "water from a long-unused well."

O'Donovan recommends for acute pulmonary oedema, atropine to physiologic effect, supplemented by strychnine, both hypodermically.—*Amer. Med.*

Dr. G. A. B. Hayes, superintendent of the Louisiana State Insane Asylum, has been indicted for causing the death of a female patient by excessive punishment.

At Saratoga, Ind., the Board of Health ordered a general clean-up; but instead of complying the citizens questioned the authority of the Board. Eight cases of typhoid by Sept. 18.

For poor appetite: Clean out the alimentary canal.

The price of Adrenalin is \$1.00 a grain. But if it will prevent all hemorrhage in surgery, and restore to life still-born children and persons dead of heart-failure, the price cuts no ice.

Prof. W. M. Wilson declares that "change of air" is a fallacy; that excepting for density and moisture, there is no tangible difference between the air of various localities. It is simply a question of hygiene.

Caldas is by no means downed by the adverse results of mosquito testing in Havana. He claims the deaths were not due to yellow fever. Nevertheless, the verdict of those who witnessed the cases is against his views.

Paris is aroused by the prevalence of rabies. In the city and suburbs last year 807 animals were killed as rabid, as well as 1,597 other animals bitten by the former. Nine people died of hydrophobia.

Muncie, Ind., blames its typhoid fever on mosquitoes. Better look to your drinking water, brothers. The mosquito has enough sins of her own to answer for, without shouldering yours. Beachmont, Mass., attributes her outbreak to campers.

Nineteen towns reported typhoid in September. And yet there are two precautions, perfectly well-known and feasible, that would render typhoid fever obsolete: Don't eat or drink sewage. Disinfect typhoid excreta as long as typhoid germs are to be found therein. Typhoid exists because these things are neglected.

Helonin is a good remedy for aching ovaries. "Dose enough."

Atlanta, Ga., is having all unused wells filled up, the gases arising therefrom causing disease.

✽

Duluth papers say that 350 children will be kept from school rather than have them vaccinated. Rodermund is at work in Minnesota.

✽

Eight springs examined by Dr. Connolly, of Newark, N. J., proved to be far too impure for use. One water, advertised as of extraordinary medicinal value, had over 1000 bacteria per ccm.

✽

Dr. W. G. Fralick has been accorded space in the New York dailies to exploit his alleged cure for consumption. It consists of a fluid injected hypodermically. From the description one would think the agent is nuclein, only that he injects a pint into each arm at a seance.

✽

The new army bill compels the surgeons to serve twenty-seven years before reaching the rank of major. Considering the high qualifications demanded of candidates, the man who enters the army medical corps as now constituted is making a greater sacrifice than good judgment sanctions.

✽

Dr. J. F. Kennedy, of the Iowa Health Bulletin, is directing attention to the dangers uselessly incurred at funerals: exposure bareheaded to heat and cold or rain. He might pursue the subject further with advantage, taking up the funerals of infectious cases and the ruinous expense of the modern method of disposing of the dead.

✽

The practice of watering garden vege-

❖ ❖ ❖ ❖ ❖ ❖ ❖

Anemonin is well suited to congestive amenorrhea from taking cold.

tables with diluted sewage is doubtless responsible for the periodic discovery of pathogenic microbes upon them. It is wise to wash thoroughly all vegetables to be eaten raw, such as lettuce, celery, tomatoes and fruit in general. Fruit from the stands over which street-dust is blown, is neither wholesome nor cleanly unless washed.

✽

In treating tuberculosis, Germany leads the world in providing sanatoria, America in preventive measures such as disposal of sputa, France in educating the public, and England, Norway, Denmark and Italy have taken up the fight with energy.

The trend of opinion is rapidly approaching the stand taken by the CLINIC years ago, that treatment and nursing are more important than climate. The Sanatorium near home is better than the mountain summit in a desert. But what are we to say of tents near Boston as winter homes for consumptives?

Dr. B. G. Watson, of Benton Harbor, claims a cure by "rest." Not enough to establish a theory, but sufficient to warrant a sanatorium.

And now the man who removes dead animals is "curing consumption" by means of the oil from the hearts and livers of dogs. An old idea, strongly implanted in the minds of the Germans especially.

Dr. J. B. Hulen, of New York, says a consumptive girl traveled from New York to Denver, arriving there quite exhausted. She applied to the Y. W. C. A., who refused to receive her, or even permit her to rest at their rooms for an hour, because she was tuberculous. Now doesn't it seem that this Association had better take down its sign?

Cicutine hydrobromate aids anemonin for acute congestive amenorrhea.

The X-ray is being used to detect paste jewels.

✽

Singers should beware of the violet, which, as well as other flowers, injures the voice.

✽

The *Chicago Chronicle* contributes as its mite to the collection of consumption cures, the plant known as beggar's lice.

✽

Brouardel says alcoholism is the most potent factor in propagating phthisis; and Daremberg attributes the recent frightful progress of this disease in France to the growing use of alcoholic drinks.

✽

Dr. R. N. Connolly of the Newark Health Board is looking for a germ that will afflict the Anopheles with a deadly pestilence, and yet not be communicable to man. First catch your hare. We would suggest a little salt on its tail.

✽

Dr. C. H. DeWitt, of Glenwood, Iowa, sued Mills Co. for \$1230, for attending smallpox cases. Some of the officials who fight doctors' charges ought to be required to nurse smallpox cases. They would get a revelation as to the value of such services.

✽

This number contains the second of the papers upon "Love and Sexuality from the Woman's Standpoint." The third paper will appear in the December CLINIC and the fourth in January. The articles are attracting a great deal of attention, supplying a chapter of information of this subject rarely if ever before published.

• • • • •

Quinine, 0.15 daily, is a sure preventive of influenza.—*Habgood*.

Dr. Whitenall, of Hastings, Ia., has constructed an X-ray machine for his own use.

✽

The Chicago health officers say diphtheria calls for a quarantine of cats. Seventy-five cats were killed at Hartford City, Ind., in one day.

✽

Diphtheria is believed to have been transmitted at Mt. Vernon, O., by the toys of a child who died of that malady fifteen years before. No other source of infection can be traced.

✽

Queer people live in Wrightsville, Pa. Their drinking water comes from a reservoir in which dead chickens are found, and the supply stream flows through a barnyard; and yet the people kick about the water.

✽

Dr. Doty, of New York City has had a first class "ad" in the notoriety given his attempt to rid a little bit of Staten Island of mosquitoes by petroleum. The value of such a limited experiment is to be computed by the value of the time wasted.

✽

What an ideal place for microbes to inhabit in peace and plenty is the carpet. Food drops on it and is trodden in, dirt is carried in on our boots, blown in as dust, and no amount of sweeping really cleans it. By the modern system compressed air is employed to cleanse carpets, under a pressure of sixty pounds. By this the carpet is rendered really clean, without injury to its texture or color. This cleansing should be repeated annually, for sanitary reasons.

For commencing respiratory catarrhs give aconitine.

The Alkaloidal Clinic

Prof. G. G. Burdick reports marked success in treating tuberculosis with the X-ray.

❖

Dr. H. M. Brown, of Milwaukee, is home from the Tuberculosis Congress. He thinks America isn't so bad after all.

❖

Milk is responsible for the scarlet fever in South Evanston. A woman whose daughter had the fever sold milk during the sickness.

❖

A case of noma is reported in a consumptive at the Youngstown hospital. All our lives we have looked for this rare malady in measles, but never found it.

❖

A Chicago boy is said to have died of a spider bite, while a New York girl succumbs to the attack of an unknown insect. "Blood poisoning," the records say, but that is only one of those explanations that do not explain.

❖

If the invention of Dr. Hillberg, of Berlin, pans out, we may see the great western stock farms turned into dairies, and the milk exported to the wide earth. Not even a refrigerator is needed, and the milk in air-tight cans remains unchanged for unlimited periods.

❖

Let the fight against insect torments go on. Do not say a word to discourage it, but let it be the next of the fads. Let it be made a misdemeanor to permit a fly, bug, flea or mosquito, to be found on one's premises. We speak feelingly—we're a bit shy on hair, and—how the flies do love to promenade on our head.

❖ ❖ ❖ ❖ ❖ ❖ ❖

A curious but very effectual remedy when menses stop from cold is anemonin, cicutine and iron iodide.

Oxygen is being applied with success to the scalp to cure baldness.

❖

Dr. Jared L. Spooner, of Peru, Ind., has been assessed \$1000 for malpractice, at the suit of Inez Furner.

❖

Dr. Emil Startz has been appointed bacteriologist of Montana; with special reference to diphtheria, smallpox being about extinguished there.

❖

Dr. Charles Zimmerman, of Milwaukee, has returned from a European sojourn. He was not favorably impressed with French surgery, but found at Zurich much of interest.

❖

Dr. Fox of Danville, Ind., is under fire for alleged neglect of smallpox cases. As health officer he gets \$50 a month, but wants \$25 a day for attending each case in addition. This is as the newspapers put it. Dr. Fox has not had his say yet.

❖

When America ventured beyond her old limits and took up the first installment of "the white man's burden," some of our European friends questioned our ability to manage dependencies. The first answer to this question comes in the sanitary work done in Cuba. The agency of the mosquito in disseminating yellow fever being established, an active warfare against the insect was instituted. In Santiago there has been no case for two years, and in Havana not a case in June, for the first time in its history. If only the rest of the community could rise to the plane of the medical profession.

Caffeine gr. 5 hypodermically with sodium salicylate saved the life of a man comatose from carbolic acid.

Dr. Seymour Gibb, of New Haven, speaks hopefully of the X-ray treatment of cancer.

✽

Prof. Freer, of University of Michigan, has been granted a year's leave of absence in which to study infectious maladies in the Philippines.

✽

Drs. E. W. Heltman and William North, of Toledo, have been sued by John A. Bennett, who wants \$20,000 because as he alleges they gave him carbolic acid instead of eserine.

✽

Smallpox has always been deadly to the Indians. It is now prevalent among the Flatheads in Montana and the Winnebagos in Nebraska. Anent the latter, the Omaha News protests against the idea being paragraphed as an "Indian Outbreak."

✽

Dr. J. C. McKowen was killed at Clinton, La., in a quarrel over a strip of land. He lately attacked vigorously the health authorities and prominent doctors of New Orleans, charging them with concealing the truth regarding the presence of yellow fever in the city, in deference to business interests.

✽

Dr. W. A. Clark, of Trenton, proposes to stamp out hydrophobia by muzzling every dog in the United States for one year. Try it, Doctor, and when the cranks get through with you we'll attend your funeral. How the Antivaccinators, Anti-vivisectionists, *et id omne genus*, would wreath their talons in your hair, and rend you limb from limb.

• • • • •

As emetic, give emetin, 0.01 every five minutes in warm water.

The epizooty has been reported in Abilene, Kansas, and Dake county, N. C.

✽

Dr. G. P. G. Girdwood, of McGill University, has succeeded in making stereoscopic radiographs.

✽

The occurrence of gangrene in the President's case has called attention to the extreme rarity of that affection nowadays.

✽

A Minneapolis physician says a sure cure for melancholy is found in the advice to keep the corners of the mouth turned up. We would amend by suggesting that if the alimentary canal be kept clear and aseptic the mouth corners will point up of their own accord.

✽

The Marine Hospital Service reports 9149 cases of smallpox in this country during 1901. Ohio is the worst, with over 3400 cases up to June 1. In Minnesota the affection has been very mild, 11 deaths in 1272 cases, but in New York City in two months there were 466 cases with 129 deaths.

✽

The following special medical inspectors have been appointed in Wisconsin:

Dr. G. O. Switzer, Chippewa and Taylor counties; Dr. H. J. Connor, Douglas county; Dr. C. B. Moore, Iron county; Dr. A. G. Spencer, Marathon county.

They will be expected to visit the lumber camps, and have full power to take all necessary measures to stamp out smallpox. Drs. Harrison of Ashland and Hurd of Hamilton have charge of that section.

Aconitine moderates the flow of active menorrhagia.

The Alkaloidal Clinic

McCaskey blames the colon bacillus for producing lactic acid and achlorhydria.

❖

Hector Mackenzie says it is a mistake for consumptives to sleep indoors, even when the night air is crisp and cool.

❖

"Dr." and Madam Diamond are reported to have left Marion, Ind., between two days, to the regret of numerous creditors.

❖

Gunshot wounds of the stomach are usually fatal; of 3,476 cases of abdominal wounds occurring during the civil war, 3,031 died, or over 87 per cent.

❖

Dr. W. J. Foster has bought the house and practice of Dr. Manting, of Lexington, Mich., who goes in search of a climate that will cure his wife of rheumatism.

❖

In his advice to the laity on self-medication, Dr. Warren should suggest less dangerous remedies than hydrocyanic acid. And, please, when Irish moss is swallowed how does it manage to reach and soothe the inflamed bronchi?

❖

The London *Lancet* calls attention to the increasing substitution of cheaper articles in food-products. Glucose substitutes sugar, the latter replaces malt, syrups are artificial sugars, roller-flour replaces the stone-milled; and one result of this is seen in the lessened appetite for these articles, and the preference for "home-made" products of all sorts. The remedy proposed is to encourage the home production of all articles that can be prepared at home.

❖ ❖ ❖ ❖ ❖ ❖ ❖

Curangine is a strong febrifuge.

Dr. R. J. Nestor, of Hudson, Iowa, has gone to Germany to study medicine and sample beer.

❖

The practice of children "swapping pencils" that have been put in the mouth is not to be commended.

❖

Dr. Opicka, of Wonewoc, Wis., has been arrested for unlicensed practice. If his practice is as bad as his verses in the *New Lisbon Times*, he ought to be hung.

❖

Two years ago Mary Campbell founded the Chicago hospital for nervous and delicate children. Fifteen patients is its capacity. Dr. John M. Dodson, it is said, is to experiment on the effects of various food-stuffs on these cases, as to their mental development. Only wealthy children are to be thus treated. Poor kids. Sometimes it is good to be poor.

❖

The popular comment on the medical aspects of the McKinley case seems to be "How little doctors really know."

Looks as if they were finding us out.

"The people were assured that the bullet had struck no vital organ, while the autopsy showed one of the kidneys had been shattered.

"The bulletins declared the wound was healing nicely, while the autopsy revealed that there was never the least hint of natural replacement of tissue.

"The doctors declared the wound not necessarily fatal, while the post mortem showed that it was fatal from the first.

"Finally the most eminent physician of all declared the President out of danger, and within thirty-six hours he was dead."

For the blues: Clear out and clean up.

Dr. W. E. Ferree, of Murray, Utah, has been appointed health officer.

✽

The Cleveland G. A. R. is said to have declared war on Dr. Raub, medical referee of the pension office.

✽

A new suggestion for reviving patients overcome with anesthetics: Slap the soles of the feet vigorously. But don't neglect artificial respiration.

✽

Here is the difference between true and false "Divine healing." A Wayne, Neb., Christian Scientist had a tumor. Dowie tried his method on it but failed. She rebelled against operation, till the surgeon (at Samaritan Hospital, Sioux City), said: "The Lord will heal you. I am an instrument in the hands of the Lord." He removed 86 pounds of tumor, leaving about the same quantity of woman, and she recovered.

✽

A French physician experimenting with sublimate and formol soaps, found them no more germicidal than ordinary soaps. This harmonizes with the results obtained by Dr. Russell, who found every medicated soap in the market swarming with bacteria; Fels' "germicide" soap being especially lively. The best soap to be found was Champion's "Althene Skin Soap," which made no pretense of being germicidal, but simply a pure soap made from fresh, clean fats. And this verdict has been confirmed by time, the "germicide" soaps having disappeared from the advertising pages of medical journals—a sure sign that they failed to give satisfaction.

♥ ♥ ♥ ♥ ♥ ♥ ♥ ♥

In Malarial Fevers, break up the chill with a full dose of atropine or pilocarpine, unload the liver, and follow with quinine arsenate, a granule every hour while awake.

Dr. French's investigation of epilepsy as caused by an intestinal parasite, published last year in the CLINIC, has just got into the papers. And yet they are termed "news" papers.

✽

Last August a jubilee was celebrated at St. Francis Academy, Oldenburg, Ind. Three of the sisters have since died of typhoid fever, while thirty at the convent are affected, and nearly 100 residing in various parts of the country have been prostrated by the same disorder, since returning to their homes. The outbreak has been traced to an infected well. No male physician is allowed to enter the convent.

✽

Dr. H. A. Veazie says New Orleans could easily get rid of her mosquitoes if the citizens would act in concert. But how about the men who do not believe the mosquito is objectionable, but on the contrary look on her as an essential and useful part of creation? Has the State Board the right to compel these people to destroy their own mosquitoes or cease from breeding them? Or if men conscientiously believe that kerosene comes direct from the infernal regions and its use favors the reign of Satan, can a tyrannical government deprive citizens of their liberties of belief and action based thereon? And since the determined opposition of a very few would render nugatory the efforts of the other 999 per mil., it is obviously useless to make any attempt at sanatory progress, but just sit still and let the skeeter keep on skeeting, or get the Eddyites to resolve her into Nirvana by suggestion.

The "Pink Calomel" tablets, calomel with aromatics, never lose a place once occupied in the pocket-case. Children take them with relish.

The Alkaloidal Clinic

Oxygen it is claimed, antidotes morphine, strychnine, arsenic and other poisons.

✽

A Chicago woman refused to pay Dr. A. M. Wheeler for six months' service on the ground of no benefit resulting. The court is meditating over the legal weight of the plea.

✽

London Hospital says seasickness can be avoided by emptying the bowels before traveling, by lying down, avoiding unpleasant sights and smells, and applying firmly about the body a twelve-foot flannel bandage. The best remedy is a morphine hypodermic.

✽

The Minneapolis people recently made an investigation to ascertain whether water from the middle of the river was better than that taken from near the shore. The result was unsatisfactory—the report being that neither was fit to drink. Reminds one of the celebrated contest between the crack artillery organizations of Philadelphia and Pittsburgh: They blazed away all day at the target—and neither hit it.

✽

R. W. Tansill says no locality in the world combines as many advantages for consumptives' residence as Carlsbad, N. M. The water is abundant and good, air dry, soil well drained, and the great springs offer a panacea for all stomach troubles. While the mortality from consumption reaches 3.69 per 1000 annually in District of Columbia, 2.67 in Massachusetts and 2.47 in New York. in New Mexico it is only .63. And of these the vast majority is made up of "lungers" coming from the east.

• • • • •

Asthenic fever with capillary stasis calls for aconitine.

A Frenchman suggests pardon as a punishment for crime. That's the one we would advocate were we found out; but for the others we would strongly oppose it.

✽

Dr. L. P. Fernandez, of Kalamazoo, seems to have been the victim of a most unkind joke. Going to Detroit to see his wife and child, a telegram to the health officer heralded him as an expert coming to confer over two cases of bubonic plague. The queer part of it is that Kalamazoo is as much mystified over the doctor's family as Detroit was over his expert repute.

✽

The following extract from *The Spatula* was not labelled joke, nor printed in the humorous department; so we infer it was meant seriously:

DOCTORS AND DRUGGISTS.

"The doctors are, without doubt, the worst enemies with whom the pharmacists have to contend; and they have injured the drug business, we believe, vastly more seriously than have all the department stores and cutters put together. As most pharmacists are still dependent in a slight degree upon the good graces of their neighboring doctors [!] it is not easy to take much of a stand against them. Nevertheless, any druggist, after a thought or two, can easily see where his revenue has been very materially diminished by the unprofessional and selfish practice of physicians acting as merchants. It is a queer code of ethics that will prevent a person from advertising legitimately in a daily paper or a magazine and at the same time will allow him to take away from someone else profits to which he is professionally and legitimately entitled."

Codeine is a better cough-remedy than morphine. Dose, 0.007, p. r. n.